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**A  
T R E A T I S E  
ON  
THE DISEASES OF CHILDREN.  
VOLUME THE SECOND:  
CONTAINING  
All the Disorders falling under  
The Province of  
THE SURGEON.**

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A  
TREATISE  
ON  
THE DISEASES OF CHILDREN,  
WITH DIRECTIONS  
FOR  
THE MANAGEMENT OF INFANTS  
FROM  
THE BIRTH.

By MICHAEL UNDERWOOD, M.D.

LICENTIATE IN MIDWIFERY

OF THE

Royal College of Physicians, in London,

PHYSICIAN to

*Her ROYAL HIGHNESS the PRINCESS of WALES,*

AND

SENIOR PHYSICIAN

*To the British Lying-in-Hospital.*

AZ 2262

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IN THREE VOLUMES.

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VOL. II.

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THE FOURTH EDITION, REVISED AND ENLARGED.

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*Ornari Res ipsa negat, contenta doceri. MANILL.*

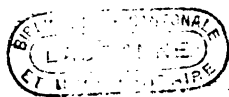
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# PREFACE.

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THE preceding volume having embraced all the more important diseases falling under the immediate province of the *Physician*, there remain only a few anomalous matters in his department ; which having some relation to other complaints now to be noticed, may be suitably arranged in this part of the work. These will be classed relatively to other matters ; having here a principal regard to the disorders falling under the province of the *Surgeon*, with others that may be said to be of a mixed kind ; but should be all familiar to every *Accoucheur*.

VOL. II.

B

BUT

BUT beside those affections which may be precisely termed Diseases, Infants oftentimes present themselves to the world under circumstances that call for immediate assistance, being, as it were in a kind of intermediate state between life and positive death, and with the appearance sometimes of being actually dead; but may, nevertheless, be reanimated by timely and judicious aid, so as to be *perfectly* rescued from any peculiar dangers.

ON this account, some practical directions, on this head, it is presumed, may form a suitable *Introduction* to this volume; as the subject could not, with strict propriety, be arranged under the head of Children's Diseases.

INTRO-

# INTRODUCTION.

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ON

APPARENTLY STILL-BORN INFANTS.

---

HAVING in the Preface touched upon all such topics as might be deemed necessary to an *Introduction* to the subsequent parts of this work, the reader is reminded, that the present Exordium is dedicated to the consideration of the state of apparently still-born children, and to point out the most likely means of their animation. And what I have here to offer is the result of an experi-

B 2

ence

ence that has been attended with more success than might have been expected.

I HAVE, indeed, both at the Lying-in-hospital, and elsewhere, met with many instances of children born with very little, and others without even the smallest appearance of life, some of whom have remained entirely destitute of any sign of it, for more than a quarter of an hour, and yet have been happily restored. I pretend to little or no skill in this business not generally practised, and can scarcely guess to what to attribute this success, unless it may be an unwearied assiduity and perseverance in my attempts, whensoever there are no certain signs of death, till I conceive nothing is possibly to be expected from them. And this has so often succeeded, that I have been tempted to think its importance may, possibly, not have been sufficiently attended to by every

## INTRODUCTION.



every practitioner. I rest this presumption, not only upon some fortunate events where I have had little or no previous ground for hope, but where other practitioners had, in some instances, abandoned it. A certain steady perseverance in our attempts to preserve life, as long as the least hope may remain, is, indeed, not only a duty we owe to the Public, but one successful attempt is an abundant recompence for many failures ; especially, as I imagine we shall rarely fail whenever there may be the least positive ground for hope of a favourable issue.

As to the MEANS, they consist only of warmth, clysters, stimulants, and especially blowing forcibly into the trachea.

THE ordinary stimulants are the smoke of lighted brown paper, or tobacco ; juice of onions ; frictions with hot cloths, and brandy ; cold brandy

B 3

poured



poured on the thorax, and on the funis umbilic. where it is inserted into the belly; striking the nates, and the soles of the feet; stimulating the nose, and pharinx with a feather, (drawing out the mucus that may present;) with every other similar mean calculated to excite a strong effort, especially that of crying; to which our attempts more particularly tend. On this account, I believe, no great benefit is to be expected from stroking the blood along the funis, or immersing the placenta in warm water; the fetal life being extinct, the recovery of the child will depend on the blood passing freely through the lungs, which it cannot do till the child is brought to breathe freely and forcibly: the continuance of which also is never secure, till it begins to cry. To these ends, I have depended above all upon blowing into the trachea, through the

the mouth, which I am satisfied, may be more effectually done by the mouth of the assistant being placed immediately upon the child's, than by means of a blow-pipe; (although the air is, indeed, certainly less pure;) at the same time, preventing the return of the air before it has entered the lungs, by the fingers of one hand placed at the angles of the mouth, and those of the other on each side the nose. But I have sometimes imagined, that I might attribute much of my success not only to the *continuance* of this, but to the *manner* of doing it, by attempting to imitate natural respiration, by forcing out the air I have thrown in, by a strong pressure against the pit of the stomach; thus blowing in, and alternately pressing out the air, for a long time together, omitting it only now and then, to make use of some of the abovementioned means:

B 4

which

which latter, however, can do very little to insure the life of the child, until it begins not only to gasp, and that with shorter intervals, but also to breathe in a somewhat uniform manner. At this time, should the child not be disposed to *cry*, which is frequently the case, I think nothing is so likely to succeed as a tobacco, or other very stimulating clyster; or putting a little Scotch-snuff, or other pungent powder, up the nose, which latter if they induce sneezing, will soon be followed by a strong cry, and the child be with certainty restored.

AMONGST other means, that of warmth was recommended; to which end, the infant should be entirely covered with very hot cloths, which should be renewed as fast as they become cool; or the body may be immersed in a tepid bath of salt and water, or milk, and be  
well

well rubbed all over: the cord may likewise be suffered to bleed a little, especially if the face or body do not soon acquire the natural colour—but this ought seldom to be done, or the funis be divided as long as any pulsation is to be felt in it.

To these means may be added the cautious use of electricity, which appears as likely to be successful in these, as in most other cases to which it has been applied: but I have never been in a situation to make trial of it, or I certainly should, as I once knew a child happily recovered by it, after being laid out for dead, for near two hours, in consequence of a fall from a two-pair of stairs window.

BUT should these several means fail; as a last resource, a very different kind of stimulant may be tried, and instead of laying the infant aside in a warm flannel,

flannel, it should be exposed to sudden and severe cold, which I remember once to have succeeded after the life of the child had been despaired of.

I SHALL just add, that, amongst other symptoms of some supposed irrecoverable injury a child may have sustained in the birth, is that of a discoloured and often fetid, or bloody water flowing out of the nose, after the lungs have been two or three times artificially inflated. Under these circumstances, however, I many years ago succeeded in two or three instances so far as to animate children sufficiently both to breathe and to cry; but they afterwards lay in a meaning state for four or six hours, and then expired. To succeed thus far, indeed, if I am rightly informed, may prove of importance, where the course of a family estate may be pending on a living child. I have, however,

ever, lately been fortunate enough to succeed completely, under the most unfavourable circumstances, and after a great quantity of discoloured mucus, and something like meconium, was forced up both from the throat and nose; and the child, an unusually large one, is still living.

It will be presumed, I dare say, that the above scrupulous attention is not designed to be inculcated in every instance of apparently still-born infants, but principally where the death of the child may not only not be certainly ascertained, but there has previously been reason to expect it would be brought alive into the world.—The great importance, however, of the subject, it is hoped, will be a sufficient apology with most readers for the length of these directions; and as the attempt to restore infants to life has always been a  
most

most pleasing employment to myself, the desire of being an occasion of inducing others to a *perseverance* in the use of the like means, emboldens me to risk the censure of any who may deem it prolix or superfluous.



A TREATISE,

A  
TREATISE,

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**I**N the former volume, considerable attention has been paid to cutaneous disorders; either from their being found to require direct medical treatment, or from their standing in connexion with other complaints strictly appertaining to the *Physician's* department.

There are, nevertheless, many affectiona of the skin of a different kind, which being either usually unconnected with any disorder of the system, or else forming sores on the surface requiring their appropriate topical remedies, fall strictly under the province of the *Surgeon*, and will therefore be considered in this place.

OF



OF the cutaneous affections coinciding with one or other of the latter descriptions, I shall for order sake, treat first of such as appear on the Head.

TINEA, or SCALD-HEAD.

**T**HIS is a very troublesome complaint, and is said to be often a scrofulous symptom; but it is certainly more commonly communicated by contact, and when lighting on a scrofulous habit may be more difficult of cure. It is, indeed, highly contagious, especially amongst children, at schools, or other places where they mix freely together, exchange hats, or other covering of the head, with such like intercourse; by which means, it has sometimes been communicated through a whole school. I hope, however, to point out a successful method of cure, the unpleasantness of which has, improperly I think, prevented its being more generally adopted.

From

From some considerable experience, I may venture to say, that being usually a mere complaint of the skin, it may be most successfully treated by topical applications. This disease is seated in the little glands at the roots of the hair; is sometimes dry, but at others moist, and then produces little ulcers, which being thoroughly cleansed, and made to digest, may be safely healed up; as I have found in many other affections of the skin, in which the system has, often over-scrupulously, been conceived to be concerned.

It is not uncommon, I know, to administer a variety of internal remedies, and perhaps they may sometimes be required, though I think I have seldom given any thing more than lime-water, or a decoction of the woods; and a few purges at the decline of the eruption.

If the complaint be taken early, before it has spread far over the head, and whilst the scabby patches are small and distinct, it may be frequently cured by an ointment made of equal parts of sulphur, flour of  
muf-

mustard, and powder of staves-acre, mixed up with lard or other unctuous substance; or by the sulphur ointment, with a small addition of the calx hydrargyri alba. And this last preparation may very safely be made use of, if the patient be kept within doors, and the body properly open; as it will be necessary to rub in only a small portion, once or twice a day, on the parts immediately affected. But if the disease should spread, or has already extended itself over a great part of the head, the hair must be shaved off, and the head washed twice a day with a strong decoction of tobacco; repeating this process till the scabs disappear, and the hair grows up from the parts they had occupied. Or, instead of the decoction of tobacco, the head may be well washed with the lotio saponacea, with the addition of a small quantity of the aqua kali puri, and the scabs anointed with the unguent. hydrargyri nitrati in the place of the sulphur ointment and calx. of mercury; the former being a very powerful, as well as a safe

safe application, and may be used in any quantity that may be necessary.

BUT the complaint is sometimes of long standing before medical assistance is asked, and is not only extended over all the head, but the scabs are thick; and rise high above the surface, returning as often as they may fall off. I have, however, never failed to cure the common tinea by a method perhaps well known, but too seldom complied with in time, on account of its apparent severity. It consists only in well washing the head, first, close-shaved, with a piece of flannel and a strong lather of soap-suds, and then rubbing in very forcibly the common *unguentum picæ* and a good quantity of the *pulvis ellebor. alb.* or other safe depilatory, for near an hour at a time, always using it very warm; and covering the head with a bladder to preserve the ointment on the part, as well as to keep it from sticking to the cap, or other covering made use of. When this has been done three or four times, not only

the scabs, but the hairs will also loosen, which must be pulled out; however unpleasant the operation may be, as it will, indeed, prove a kindness in the end; but must be repeated till all the hairs be taken out: after which new hair will rise free from scabs, which is a sufficient indication that the disorder is effectually removed. Some writers with the like view advise the application of repeated blisters, after the head has been close shaved.

The following plaster is strongly recommended by Mr. THOMAS MORISON, Surgeon in *Dublin*, as successful in the worst cases.

The head is to be well washed and a bread and milk poultice applied, if the scabs are very dry; and the plaster afterwards applied, spread on strips of linen, which are to be renewed every day. Take of common ale, one pound; of the finest flour, three ounces; mix them intimately; and having set them over a very brisk fire, add two ounces of yellow resin, stirring them

them constantly until they shall be perfectly incorporated, and take on a smooth gelatinous appearance.

THERE is, however, a spurious kind of scald-head, that is sometimes more difficult of cure; but it requires nothing but patience in the use of one or more of the above remedies, or at most, an alterative plan of the flowers of sulphur, or of some mild mercurial preparation, with the common decoction of the woods, or the Lisbon diet-drink. Or, should the difficulty consist in getting out the hair entirely, or destroying the diseased glands at its roots, the calx viva may be had recourse to, in one form or other; and is exceedingly preferable to an adhesive pitch-plaster. In a few instances, the unguent. hydrargyri mitius has a wonderful efficacy. This remedy should, however, be cautiously applied, and instead of being forcibly rubbed in, like other topical remedies, should be only spread lightly, and very thin on the scalp: the body should at the same time be carefully kept open.—In the spuri-

ous tinea particularly, it may be prudent to open an issue, or fix a seton in the nape of the neck.

SCURFINESS *of the* HEAD.

**S**OME infants early contract a scurfiness on the head, which increases as they grow up, becoming likewise very thick, and itching exceedingly. It is more commonly dry, but is sometimes moist, and even discharges a great quantity of a very thin fluid. In either case, it can scarcely be termed a disease, and is only worthy of mention with a view to preventing mischief, from the application of improper remedies; or its degenerating into a real complaint, through neglect. Amongst the poor, indeed, it often arises from that source, and can be removed only by proper combing of the head, and otherwise keeping it clean. But should it arise spontaneously, as it sometimes does about the time of teething, I believe that very little

little need to be done, nor ought to be, further than keeping the head clean, and often combing, or brushing it cautiously, as above directed : at most, the scabs may be touched, every now and then, with a little cream till they begin to loosen, or with a drop or two of arquebusade water if they are too moist ; at the same time, carefully avoiding taking cold on the part.

I HAVE, however, sometimes seen a scurfiness of the head, taking place even during the month, attended with an excessive discharge of a thin fluid ; which it would be alike improper either to repel, or encourage. A good general application in this case, though truly anile, is that of warmed butter and beer, with which the head may be washed twice a day ; and certainly not only does no harm, and keeps the head clean, but has appeared to me, in some instances, to do more to remove the complaint, than anything I have seen used.



## SCABIES, or ITCH.

**T**HIS disorder so commonly known and easy of treatment, is mentioned chiefly in order that nothing may be over-looked relative to the disorders of child-hood. It is a very contagious disease, but usually easy of cure, and seldom requires any thing more than a free use of the unguentum sulphuris. There is, indeed, a spurious kind, (as of the tinea) which is far less, or often nowise contagious, but is more difficult of cure than the genuine. Should the brimstone ointment, therefore, fail, sulphur should be administered inwardly, and sometimes mercurials; which may likewise be added to the ointment, and in a few weeks, at most, will not fail of removing the complaint. It is common to administer at the same time some alterative diet-drink.

HERPES

## HERPES MILIARIS, or SHINGLES;

(RINGWORM.)

**T**HE Herpes miliaris, and the Shingles are distinguished by some writers, but I can see no good reason for it; and M. AURELIUS SEVERINUS, and others, have esteemed them to be the same disorder.

The Herpes, like the foregoing complaints, is a disease of the skin, infesting some children almost annually, and appearing in dry scurfy blotches, on different parts of the body, and usually of a circular form. It becomes troublesome chiefly from the violent itching that attends it, and would probably get well of itself: it even sometimes has the appearance of being critical, or is, perhaps, rather an indication of some favourable change in v~~o~~letudinarians, especially in adults, who are sometimes found getting the better of chronic complaints at the time the shingles makes its appearance. It is, how-  
C 4 ever,

ever, often a blemish, as it frequently attacks the hands and face, and especially the forehead; and in the former case, is sometimes sore. It is amongst the vulgar errors, I believe, that when it appears on the breast or loins, if it should extend round the whole body, it would prove fatal. This form of the disease is termed *zona herpética*; but if it should prove fatal, the complaint is more likely to be the proper *zona*, or *ignis faciei*, which very much resembles the *erysipelas vesiculorum*.

THE herpes miliaris is also by many distinguished from the ring-worm, (but perhaps needlessly;) the former being always supposed to arise from an affection of the system, and to be preceded by shivering, or sickness at the stomach. They are certainly both very easily cured, and probably would alike disappear of themselves. The herpes yields very readily to stimulating and astringent remedies. Spirit of wine; saturnine lotions; with the addition of vinegar, or white vitriol, and ointments

ments containing lead, answer very well; or an ointment of calcined zink and lard: but the unguent. hydrarg. nitrati is preferable to most others. The use of a flesh-brush is a good prophylactic, in habits accustomed to the complaint.—It can be only in unhealthy children, that there can be any fear in regard to topical applications, or need of internal remedies.

Should the shingles spread and become sore, it should be treated as directed below.

### HERPES EXEDENS, or SERPIGO.

**T**HIS is a malignant species of the above complaint, but is generally local. It is mentioned only as having relation to the former, being rather a sore than an eruption, and not very common in children.

SUPPURATIVE applications may be made use of in the early stage of the complaint, such as ointments of minium, soap, and Venice turpentine, or a suppurative poultice, in order to liberate the diseased glands

glands on the surface, and absorb the acrid discharge. A very good poultice of this kind may be made of figs, onions, and white lily roots, boiled in water to a soft pulp, with, or without the addition of a little bread and milk. After this, the parts should be washed with saponaceous lotions, and lastly, with strong solutions of vitriol. Should these fail, the ung. hydrarg. nitrati will be proper; and as the last remedy, caustic applications; of which, butter of antimony is the best, with which the little ulcers may be touched lightly from time to time. The patient may take at the same time of a decoction of burdock-roots, or farfaparilla.

#### VERRUCÆ—CLAVI PEDUM.

THOSE Warts which appear upon the fingers, hands, and necks of children, may be considered as a small inconvenience, or a trifling deformity, rather than as a disease. They are seldom painful, except they

they have been improperly irritated; and have no tendency to proceed to any unfavourable event.

SURGICAL writers have generally agreed in considering them as the effect of a certain morbid state of that part of the skin in which they are situated; but what that peculiar condition of the skin is, by which they are produced, has not been exactly ascertained: the various accounts of it are all very problematical; and of these, perhaps, Mr. FREKE's is as ingenious as any.

THE hard, and almost insensible wart, with a broad base, and having a cuticular covering is the most common species. This little excrescence seldom rises high above the level of the skin, on the back of the hand; and is often remarkably flat and low when it germinates on the inner part of the hands or fingers; and being a spurious production, seldom possesses a vital energy sufficient to prolong its duration beyond a few years. Hence we commonly observe, that those warts which appeared in infancy disappear imperceptibly

tibly after the age of puberty, without the aid of external applications. This is sometimes the case likewise, when warts have first appeared in adult age, more especially where they have been small and sessile.

THE various methods that have been recommended of destroying warts, may be reduced to the two following classes. Such as intercept the circulation of the blood through the substance of the wart ; or secondly, those which produce a destructive inflammation in them.

1st. Ligatures made of horse-hair, or silk-threads. Whenever these can be conveniently applied, they are the least dangerous, and the most effectual. For it is a certain fact, that warts removed by ligature return less frequently, than when destroyed by any other means.

2dly. Caustic applications, or the actual cautery : or spirit of sal ammoniac with quick-lime : vitriolated copper : nitrated silver : butter of antimony : burning sulphur.

When the surface of the wart is destroyed

stroyed by any of these applications, the hard crust must be scraped off the next day, and the medicament be re-applied; and this process must be repeated daily until the excrescence be destroyed down to its root.

When a wart is situated on a joint, or on one of the lips, or on the eye-lid, it will not be prudent to use caustic applications.

I have not mentioned the excision of the wart because the excrescence is so very liable to sprout again when it has been cut through, that this method is advisable only when it is proposed to employ caustic applications to the wounded part.

## CLAVI PEDUM.

**Y**OUNG People are less subject to this excrescence than adults; but being, nevertheless, not exempt from it, a cursory notice of it, at least, may not be improper.\*

\* The reader may see a fuller account of the nature of Corns, and their treatment, by Mr CARLISLE, Medical Tracts and Observations, vol. vij.

## CORN



**CORNS** appear always about the feet; usually the upper part of the toes, and on the joints; on the under part of the foot where the pressure is the greatest; or under the nails; and are painful, especially if pressed much by tight shoes, or other covering of the feet. They differ also in other respects from the wart; the corn having the appearance of an inverted wart, the surface of the former being not unlike the inferior part of the latter.

**THE CORN** seems to be little more than hardened skin, and to be owing merely to compression: it is therefore rather a morbid change of that part than an organized excrescence, and on that account, does not endure the rough treatment of the wart. It may, however, be safely pared down from time to time, but not to that degree as to be made to bleed, or rendered sore, especially in people advanced in years. The common wafer made use of for sealing letters, moistened and applied to the corn, is both a harmless covering and defence, and has sometimes appeared to loosen  
this

this excrescence; and occasion is to be thrown off.

STEATOMATOUS TUMOURS,  
or the SUET-LIKE WART.

**B**ESIDES the above mentioned excrescences, there is one of a very different kind; which though when appearing about the neck and face, it passes with many people for the common wart, is really a suppuration of the little sebaceous glands, and appears chiefly about the face, neck and head, where this kind often grows in great numbers; and is the only kind of steatoma here treated of. They more commonly infest young children, and particularly infants when cutting their teeth; and will fall off, and appear again frequently, during that period. They discharge a suet or cheese-like matter, as other inflammatory tumours of this class; after which, they heal up, and return again, like the stythe, or styne on the eye-lids.

Being

Being of this harmless nature, it is unnecessary to do more than notice them; unless it be just to add, that as a preventive, the adjacent parts may be well rubbed two or three times a day; but when the tumours are grown to a certain size, they should be inclosed in a ligature before they break, or should be touched with the *argentum nitratum* immediately afterwards.

## OPHTHALMIA.

**T**HE eyes of new-born infants are very apt to be inflamed during the first three or four days after birth, especially in the winter season. If it be owing to taking cold, it is probable it has been either immediately after the child was born, before it has been given away to the nurse, or very soon afterwards; and on this account, a flannel cap becomes a very necessary part of its covering previously to its being formally dressed.

This

This kind of inflammation, however, is seldom of much consequence; and generally disappearing of itself, upon merely keeping the head warm, or by washing the eyes with a little rose-water. Should the inflammation continue many days, or perhaps seem to increase, three or four drops of the aq. lithargyri acetati and a grain or two of white vitriol may be added to two ounces of the rose-water; and the infant take a little manna, or rhubarb and magnesia, if the bowels should not be sufficiently open. But there is an inflammation to which infants are liable, that sometimes continues a long while, and therefore calls for further attention. I do not allude to that redness on the eye, known by the name of *fugillatio*, which will often remain a long time, return, and disappear again, without the least injury to the child; nor to the watery eye, which will sometimes continue for many months, and even for years; of which notice will be taken afterwards. But the affection intended here is accompanied with the true

appearances of ophthalmia, attended with a discharge as in the ophthalmia of adults: it will sometimes get a little better by common means, but seldom remains so for many days together, and generally increases at the end of the month.—It often seems connected with the state of the bowels, and the coming on of a purging will then frequently cure it.

I HAVE nothing out of the common way to recommend for it; \* nor does it require much to be done, unless it prove tedious, as it has been said it sometimes does, in which case the parts behind the ears should be made sore, and be kept so for some time. Previous to this, it is often necessary to apply a blister to the back, and a leech to one or both temples; to keep the body open, and make use of the cooling collyrium before recommended. If the child be inclined to a frequent return of it for years, as I have known even very healthy children, it will some-

\* For a more full account of the treatment of *ophthalmias*, see *Surgical Tracts*, 3d Edition.

times

times degenerate into what is termed the watery eye ; an excellent remedy for which is a grain of white vitriol, mixed with such a small portion of any unctuous substance as will form it into a liniment, which should be put into the inner angle of the eye every night, at going to bed. In some of these cases, however, the ointment of nitrated quicksilver has proved a more speedy remedy, and is a less painful application.

There is, however, a case of watery-eye attending older children, in which the discharge is very hot and acrid, and the eye at the same time inflamed. These affections disappear, and recur again suddenly, without children having sensibly taken cold, or any other manifest cause ; and will continue so doing for a great length of time. It is not a common complaint, and as far as I have noticed it, has attended only such children as have other marks of humour, so called, or some disorder of the skin.

The complaint has proved very obstinate, both in regard to the inflammation,

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and

## 36      PURULENT OPHTHALMY.

and watery discharge, though all the common means of cure have been successively attempted, until the head has been shaved, and an oiled-silk cap applied over the whole scalp. This never fails to procure a great discharge from the head, and I have known it remove the complaint in two or three days, after a long use of other remedies.

BUT there is a far more formidable inflammation, which has of late years been called the purulent ophthalmy, distinguished from every other by the vast quantity of thick matter discharged, and great swelling of the lids.

THIS is so dangerous an inflammation as to require the best advice on its very first appearance. It now and then appears at the birth, but more commonly seizes an infant a few days afterwards, without any previous complaint; and when neglected, has sometimes not only destroyed the sight, but dissolved the eye itself, in less than a week's time. I have likewise seen it exceedingly

ceedingly violent in children of four or five years old, but rarely without some blow, or other accident.

In this disease, every thing that may remove inflammation, and unload the vessels of the part, should be immediately had recourse to. The body should, therefore, always be kept open, and leeches be applied to the temples, especially in children of four or five years of age. In bad cases at this period, scarifications also of the tunica conjunctiva, (which generally falls out upon their being opened;) blisters to the back, nape of the neck, and behind the ears, are often essentially necessary. It should ever be remembered, that in advanced childhood, the taking away of blood at the beginning is often not to be dispensed with, nor to be sparingly done. The application of one leech to the temple, or neck will have no good effect, though often repeated: two, three, or more, according to the strength of the child should be put on at a time; and a blister to the back soon afterwards; which

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will



will often do more to conquer the inflammation, than most other means put together, if had recourse to in time.

EVEN in new-born infants, it is expedient, in many cases, both to take away blood, and to keep up a constant discharge from behind the ears, which may be done by applying, every three or four days, a narrow slip of blistering plaster to these parts, and afterwards dressing them with the ceratum spermaceti, or other mild ointment. The edges of the eye-lids should be kept constantly greazed throughout the day, especially in new-born infants, that the thick matter may find an easy escape. At night the ceratum lithargyri acetati may be spread on soft linen, and applied to the eye, and over it a very soft cold poultice made with the aqua lithargyri acetata, laid on as lightly as possible; that by its constant moisture, the eye-lids may always be kept supple. But if the discharge should seem to be confined, or the eye affected, by the weight of the poultice, this application should be changed

ed for soft linen rags, which should be frequently wetted with cold brandy and water, or some yet more astringent lotion.

THROUGHOUT the complaint, astringent and stimulating applications are to be made use of, unless the complaint be very slight, or sensibly gives way very soon; being not only far preferable to other means, but so necessary, that should emollient poultices, and merely cooling collyria be depended upon, the event were likely to be fatal. What may be the very best remedy, in the worst cases, it may not be very easy to determine, having for many years succeeded, and in a reasonable time, by different means. But ever since I have seen Mr. WARR's first publication on diseases of the eyes, I have had such frequent, and successful recourse to the aqua camphorata, as recommended by him, that I am inclined to give it a general preference to other remedies. One dram of the aqua camphorata of *Bate's* dispensatory, to two ounces of water, will be a sufficient strength to begin with. A few drops should be in-

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stilled

stilled into the eyes, several times in the day, as well as the lids be frequently washed with it. It will sometimes be necessary to inject it into the eyes with a syringe, the lids being so much swelled, as not to admit of its entrance by other means.

THE topical remedies alluded to, in the place of the aqua camphorata, are tinct. opii, and the unguentum hydrargyri nitrati, which should be applied every night at going to rest; the former being dropped into the eye after the lids have been touched with the ointment.\* It is sometimes proper to lower and soften the ointment with a little fresh butter, or ol. amygdal. and to add a little camphor.— In a late instance, the complaint has been speedily removed by the electric aura.

\* This tincture and ointment are usually a very speedy remedy for the sore-eye induced by the small-pox, and measles; as well as for the ophthalmia in ferocious habits; a complaint under almost every other mode of treatment very tedious of cure.

It

It has been said, that where this inflammation has not been properly treated from the beginning, the eye is sometimes exceedingly injured by it, so that even the coats of the eye will burst. At other times, the cornea becomes much thickened, and the pupil more or less opaque by means of one or more specks which the inflammation has occasioned. It should be remarked however, that we sometimes meet with an agreeable surprize at the decline of this formidable complaint, and find the eye much less injured than had been suspected at the time we were first able to get a sight of it. And at others, even where the cornea has burst, the aqueous humour has been restored, and being confined by the cicatrice, the patient has recovered his sight. On the other hand, the cornea has sometimes been so greatly injured, or the iris contracted, that though the eye has not been sunk, the sight could not be restored by any means. In other instances, a long and cautious use of escharotics, and paring off the

the thickened parts of the cornea, have afforded a certain degree of vision.

## PSOROPHTHALMIA.

**T**HIS complaint is so much of the nature of the former, but with more sensible affection of the lids, and less of the eye itself, that I need only to recommend for it the use of the like applications. In particular, slight scarifications of the lids, in some instances, and the application of the ung. hydrarg. nitrati, and immediately afterwards instilling a few drops of laudanum into the eye, will usually very soon have a good effect; but the cure is often a work of time.

IN some permanent inflammation, I have been inclined to the opinion of the late Dr. HUNTER and others, who after having tried a variety of means, and assisted in consultation with different physicians, have been induced to think, that many of the  
very

very stubborn ophthalmias originate from a venereal taint, and can only be successfully treated by its specific remedy, in one form or other.—Every practitioner will be very careful how he takes up such an opinion in particular instances;\* however, it is right to observe, that if none of the means above recommended should produce a favourable change in eight or ten weeks, I believe nothing but that specific species of alteratives will have any lasting effect.

THOUGH it is not my design to treat on this disease, it may not be amiss to observe, that whenever a venereal taint actually exists, it is more safely treated by unction than in any other way; and in-

\* The *French* physicians seem too much inclined to regard the purulent ophthalmia in this view, being a very common symptom, amongst others truly venereal, in many infants in the *Hôtel-Dieu*, *l'Hospice de Salpêtrière*, *Faugirard*, and *des Enfants trouvés*; but when this species of ophthalmia appears alone, the case should not be hastily concluded to be venereal, however violent the ophthalmia may be.

fants

infants would probably be cured much oftener than they are, if recourse were had to it in better time than it commonly is. If internal remedies, however, are for any reason preferred, I have found none so efficacious, convenient, and safe, as the late Mr. WARD's white drop.—In a writer before quoted, I find a strong recommendation of the soft pulp of sarsaparilla reduced to a fine powder, and administered in the infant's pap. But having had no experience of it myself, I can only say, that where it may be found to agree with the stomach, it may have its advantages for new-born infants, or perhaps, prove an auxiliary to mercury in those of a more advanced age.

In an Appendix given by Mr. WARE to his last account of ophthalmy, he mentions a species he has lately met with in young children, originating from a foul state of the primæ viæ. In this kind, no topical means will effect a cure without administering at the same time active purges. He advises calomel particularly, of which a few grains should be taken at  
bed

bed time, and a dose of jalap the next morning. This course should be repeated three or four times in quick succession. Tonic remedies, such as the bark and steel are said to be sometimes useful afterwards.

Alike inflammation he attributes to difficult dentition; which necessarily calls for a thorough, and sometimes repeated lancing of the gums.

LEUCOMA, or SPECK of the EYE.

THIS is often a consequence of long continued ophthalmias, and is mentioned by Dr. ARMSTRONG amongst the diseases of children, in his second edition. He directs a variety of things for the cure of it; which he says are often efficacious if the specks have been recently formed, but when of long standing, he has never seen any method successful. I shall only observe, that in a very great number of cases, a drop or two of the aq. cupri ammon. instilled into the eye, two or three times a day,



## 46 CATARACT, *and* GUTTA SERENA.

day, has removed such specks, in the course of a few months, and sometimes much sooner, without any other means. Should this fail however, trial may be made of a solution of the hydrargyri. muriatus, one grain being put into four ounces of water, and the ointment of nitrated quicksilver be applied in the manner before recommended; and like the other remedies be continued as the disposition to inflammation may admit.

## CATARACT, *and* GUTTA SERENA.

**A**LTHOUGH these disorders are not very common in young children, they do, nevertheless, sometimes occur; and infants have even been born with a cataract in one or both eyes, or totally deprived of sight by the gutta serena. I shall therefore speak of these two diseases together, and the rather because some of the remedies are here accommodated to both.

IN

IN the former of these, it is well known, that the pupil appears white or pearl-coloured, instead of black; and in the latter has but little of an unnatural appearance, except that it is larger, and neither dilates nor contracts when exposed to different degrees of light.

It would, indeed, ill become a man of the least character and experience to affect to have much to offer in a way of remedy for these dreadful complaints; the oldest and best practitioners never having pretended to be very often, or by any means uniformly successful in the treatment of them. From what I have known, however, they are not to be despaired of, and I should think it unpardonable not to hold out every occasion of good, or of comfort in my power, however little it may be, in cases wherein art has so generally failed—*Valeat quantum valere potest.*

WHERE a disposition to cataract and gutta serena have been suspected, I have known very considerable benefit obtained, and even the sight fully restored  
by

#### 48 CATARACT, and GUTTA SERENA.

by an alterative plan of calomel and cicuta; or by the long continued use of an aromatic vapor with spirit. ammon. compos.\* conveyed to the eyes by means of a tube properly adapted, and brushing the eyes and the adjacent parts, several times a day, with soft and smooth brushes, which are properly constructed by *Messrs. Ayliffe and Gee*, in *Wardour-street*.

Somewhat agreeable to this idea is the plan since recommended by Mr. WARE in his late treatise on certain disorders of the eye; and like many other important discoveries, was the effect of accident. Upon this he happily improved, having succeeded in several instances of incipient cataract when the consequence of external injuries, by exciting a transient inflammation. The application he has employed to this end has been ether, either alone, or diluted with a third or fourth part of a weak solution of hydrarg. muriatus, and

\* Half an ounce of the spirit with two ounces of water, should be kept boiling over a lamp, and be made use of two or three times a day.

some-

sometimes mixed with oleum succini; which has in some cases been soon attended with a sensibly good effect, though in others not till it has been repeated for several weeks. The success attending these cases, Mr. WARE adds, encourages him to hope for the like where the opaque crystalline is either soft, or fluid; in which state it usually is when the disorder is discovered in infants, either at the time of their birth, or shortly afterwards.

In the gutta serena, electricity has succeeded in several cases; and in one instance, a lady whilst under such a course, suddenly recovered the perfect use of her eyes, through a blow she accidentally received on the face, which produced a copious hemorrhage from the nose. In imitation of this, the like discharge has been artificially procured by wounding the internal vessels of the nostrils; but without apparent good effect. Mr. WARE in the above mentioned treatise confirms this favourable opinion of electricity, and adduces four instances of gutta serena cured

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by

### 30 CATARACT, and GUTTA SERENA.

by it, and as many by a medicated sauff composed of ten grains of hydrarg. vitriolat. with about a drachm of the pulvis asari comp. or in place of that, the glycyrrhiza, or saccharum commune. The external use of the capsicum has likewise lately been attended with success. To this end, one grain of *Cayenne* pepper is to be infused in cold water, of which a few drops are to be instilled into the eyes, three times a day.

A curious remedy has been lately had recourse to with some success, by *Professor ARNAMANN*, of *Göttingen*, and any new remedy for such a disorder is an acquisition. This consists only in exciting vertigo by placing the patient in a whirling chair, with his head at various distances from the centre. Not that the vertigo, it is observed, is a co-operating cause, (though it is a favourable sign;) but the strengthening and restoring tone to the eye, by exercising it with vertiginous, or rotatory commotions of the head. Another remedy advised by this author, is the exhibition

hibition of camphor, with, and without, *belladonna*; the former in doses from two to six grains, generally, twice a day, and the latter in doses of one or two grains, every day. These medicines, however, it is remarked, can be productive of good only in cases of real debility, arising from want of excitation, or in asthenic; while on the contrary, in plethoric weakness, they must necessarily be detrimental to the patient, and aggravate, rather than diminish, the symptoms of the disease.

It should be observed, however, that where the *belladonna* can be dispensed with, it certainly ought, as it is a medicine not to be trifled with. The exhibition of calomel together with the camphor, has also been used with much success lately in London, especially while under a course of electricity.

To these brief observations I have only to add, that a gentleman of near sixty years of age, for whom I had been consulted about three years before; some time after having been let blood in the above

**.52 CATARACT, and GUTTA SERENA.**

mentioned way, and made trial of electricity without any apparent advantage; recovered from a gutta serena of near two years standing, under the use only of a common collyrium: which as I cannot conceive to have had any share in the cure, conspires with a few similar instances to hold out ground of encouragement to other sufferers, sufficient to prevent despair, under this melancholy disease.

I have little more to say in relation to the cure of the cataract by a surgical operation, either by extraction or depression, than that neither of them is adviseable for infants unfortunately born with the disease, till they have attained to five or six years of age.—How far readers may at any time be disposed to make trial of the means for the dissipation of the cataract hinted by Mr. WARE, will, probably, depend upon some further information with which that attentive practitioner may favour the public. In the mean time surgical readers will do well to consult the above mentioned treatise for some very excellent

cellent practical observations on the mode of extracting the opaque crystalline; as well as the observations of Dr. REIMARUS,\* adopted by Dr. GRASMAYER, at *Hamburg*, on the use of the extract of the *Belladonna* dissolved in water, previous to the operation. A few drops instilled into the eye, soon rendering it paralytic for a short time, with great dilatation of the pupil, whereby the eye is said to be rendered very manageable under the hand of the operator.

HORDEOLUM STEATOMATUM,  
Or the STITHE, or STYE.

THE species of stithe here intended, is sufficiently distinguished by the nosological term. It is a small inflamed tumour on the edge of the eye-lids, more commonly on the side towards the nose; but there are sometimes two or more at a time. It rises suddenly, as if from a cold, or blast,

\* *Magazine Encyclopedique*, 1797.



#### 14 HORDIOLUM STEATOMATUM.

and in the end suppurates, forming matter of a thick, or cheesy consistence; often, indeed, not for several weeks, or even months, but sometimes much sooner. It is occasioned by an obstruction in the glands of the eye-lids; and the matter being inclosed in a hard cyst, the inflammation often returns in the same spot, till the cyst being destroyed by repeated suppurations, the cavity is afterwards filled up, and the complaint disappears.

ALL that is necessary to prevent the returns of this temporary blemish, which greatly weaken the eye, is to imitate this process of nature. To this end, the little abscess should be touched, as soon as it breaks, with the *argentum nitratum*, cut to a point, (carefully avoiding doing injury to the eye); which by destroying the cyst, at once removes the complaint.

When these stiches are small, or hang by a very narrow base, they may be safely cut off, or tied very tight with a bit of silk, and when separated, touched with the caustic as before mentioned.

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DEAF.

## DEAFNESS.

**C**HILDREN are frequently rendered deaf, in different degrees, in one or both ears, by very slight colds, and at the expiration of a few days the hearing returns, without recourse to any means. It is, however, sometimes otherwise, and it becomes necessary to give a little purging physic; to keep the ears warm; and to confine the child to the house: and where this does not succeed, the complaint is not a little difficult to cure. Should it arise from indurated wax, it will be proper to syringe the ears with warm water, to which should be added a tea-spoonful of lavender, or honey-water; and a few drops of warmed oil of almonds may be instilled into the ears at going to bed. If these little means fail, warmer remedies should be made use of, such as the following, which I have found very frequently successful.

R. Olei amygd. 3ß Ol. Succini rectific. gtt. xx. Spir. Camphorat. ʒß. Tinct. Castor. ʒj. Misce, et instill. guttas iv vel vj calefact. aur. affect. nocte et mane.

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Deaf.

Deafness, however, is sometimes owing to the want of a due secretion of wax, and is then much more difficult of cure. To promote this secretion, a few drops of the soap-liniment, oil of almonds and ether, and such like warm acoustics should be tried, and continued for some time, if they should not occasion much pain; and in all cases, blisters may be applied behind the ears. The juice of onions, or a clove of garlic, raw, or roasted, put into the ears, has sometimes restored the secretion, and removed the deafness; and in many cases it has been effected by electricity. I have, however, lately fallen upon a method that has been universally successful by very simple means, consisting only in adapting an entire covering to the ear, made of any adhesive plaster spread upon thin leather, so as completely to exclude the external air. The plaster should be renewed as often as it gets anywise loose, repeating it till the secretion of wax is in sufficient quantity; which seldom requires more than five or six weeks.

But

But I am sorry to add, that although aurists have found it so difficult to restore this secretion, and have therefore conceived, deafness to be often owing to the want of it, I have frequently found it nowise relieved by a return of the secretion. Possibly, this may be owing to the cause of deafness lying in the auditory nerve, which is frequently the case; and here also, electricity is particularly adapted, either through the meatus auditorius externus, or the Eustachian tube. Medicated snuffs also that invoke gentle sneezing, and discharges from the head, have sometimes been found surprizingly efficacious; as hath likewise sea-bathing. Should these different methods fail, very little is to be expected from art. Nature, however, sometimes effects the cure; and children after having been deaf for several years, suddenly recover their hearing, especially females: one fortunate instance of which happened lately.

EAR-

## EAR-ACH.

**I**T is needless to say much on this article. The pain is usually spasmodic, or if not, it is owing to taking cold in some part about the head, especially the teeth. In this case, a diaphoretic at going to bed, and a dose of cooling physic the next morning; with a clove of garlic put into the ear, or a poultice of onions applied over it, will remove the pain. If these fail, a blister may be applied behind the ear.

If it arise from spasm, the pain is often exceedingly severe, and is apt to return frequently; being readily excited by every little cold, especially in some habits, tormenting young people at times for several years. The juice of rue is here a good remedy, or if this fail, a little laudanum added to the acouftic directed for deafness, and dropped warm into the ear.

TOOTH-

## TOOTH-ACH.

**I** JUST glance at this painful complaint as at the former, which also frequently accompanies it at every age; while some young children suffer by it greatly during, or after shedding their first teeth.

If it be proper to have them drawn, that is the well-known, and most certain remedy; but when that operation may be, on any account, objected to, palliatives will sometimes succeed; such as a blister behind the ear; a clove of garlic, or a few drops of laudanum, made warm, and instilled into it, or a pepper-corn bruised, put into a little linen bag, and wetted in hot brandy; pounded ginger and white of egg, laid to the cheek; a few drops of ol. Caryophil. aromat. applied on lint to the hollow tooth, and especially the paste, or plug, contrived by Mr. COCKRAN, which the great good effects I have been witness to, will, I hope, be a sufficient apology for mentioning.

CANCERUM

## CANCERUM ORIS.

**T**HIS is chiefly a complaint of children, is often talked of by nurses, and is usually as trifling as any. It has, indeed, been said by some writers to prevail very much in *England* and *Ireland*, and to be often a serious complaint. Such a disorder, if it really be canker, may be treated as under the next article; but the common canker is rarely troublesome to cure.

It sometimes makes its appearance in the month, at others, about the time of teething; and frequently at the age of six or seven years, when children are shedding their first teeth, and the second are making their way through the gums; which are covered with little foul sores, extending sometimes to the inside of the lips and cheeks. It seldom requires more attention than was mentioned under the article of dentition; any mild astringent application, and keeping the body open, usually

ally effecting a cure ; or if it does not, and the complaint makes its appearance at the time of teething, it will generally go away as soon as the teeth are come through.

The worst species of this complaint that I have happened to see, has been during the second period of dentition, when a child has been shedding a number of teeth together, leaving the rotten stumps behind, which have been neglected to be drawn out. The whole gums will then sometimes be spongy, or dissolve into foul, spreading ulcers, and small apertures will be formed, communicating from one part to another, accompanied with an oozing of a fetid, and sometimes purulent discharge.

If the stumps of the decayed teeth can, in this case, be easily got at, they ought to be extracted ; after which, some such application as the following will soon brace the loose gums, and heal up the ulcers.

R. Bol.



**R. Bol. Armen.**

**Gum. Myrrhæ**

**Cort. Peruv. pulv.**

**Cremor. Tartari āā ʒi.**

**Mel. Rosæ q. s. misce, ft. Pasta.**

**R. Aq. Calcis ʒviij.**

**Tinct. Myrrhæ,**

**Mel. Rosæ āā ʒß. ft. Mistura.**

The gums should be touched several times in the day, especially after meals, and at going to bed, with the above paste, and the mouth washed occasionally with the mixture.

If no considerable change for the better should take place, in a week or ten days, a drachm of alum may be substituted in the place of one of the drying powders, and instead of the above mixture, one acidulated with as much of the muriatic acid as the parts will endure, occasionally made stronger, till some amendment be perceived; the belly being, in the mean time, kept properly open. If internal remedies be thought necessary, Peruvian bark, sarsaparilla, and mineral acids will be the  
pro-

properest; and the child may be kept on a diet of milk and vegetables.

GANGRENOUS EROSION of the CHEEKS.

THIS complaint has some resemblance to the canker, though it is much more dangerous, and is not a mere local disease. I have seen no clear account of it in any late writer but Mr. DEASE of *Dublin*, who seems to have met with the disorder pretty frequently, and describes it very accurately in his tract on the diseases of *Lying-in Women*, &c. to which I am very much indebted on this occasion. Mr. HUMLOCK, indeed, in his treatise on dentition, printed in 1747, mentions a complaint that seems to be of this kind, though he does not appear to be well acquainted with it.

It usually attacks children from two, to six or eight years of age, especially the unhealthy, and such as have been subject to worms. The whole body often feels cold

cold on the approach of the disease ; after which a black spot appears on one of the cheeks or lips and spreads fast ; but without any marks of inflammation. Oftentimes the whole side of the face is eaten away, together with the lip, so that the bare jaw-bone and inside of the mouth appear. In the end, the entire lower-jaw falls down on the breast, and the whole side of the face is dissolved into a putrid mass ; a colliquative diarrhœa taking place from the offensive matter that is continually swallowed, especially by very young children.

IN the CURE, internal as well as external remedies are required ; and only such as correct putrescency, and support the strength, seem to be of any use. A few drops of the acidum muriatic. therefore, taken inwardly, in the infus. rosæ, or in the child's drink ; the saline draught in effervescence ; and in the end, the bark, in doses suited to the age, with good broths, jellies and wine, are the proper remedies. The parts should be washed,  
and

and likewise injected with muriatic acid in chamomile, or sage tea, and afterwards dressed with the acid mixed with honey of roses, and over all a carrot poultice. The child should in the mean time be gently purged with magnesia or rhubarb, to carry down the putrid matters it may have swallowed. By this treatment, Mr. DEASE informs us, he has recovered every patient except one, since he had recourse to this plan, which the world is much indebted to him for making public; though fortunately this complaint does not appear to be, by any means, a common one.

INDURATION *of the* BREASTS.

It would be improper to pass over the slightest affection that has on any occasion exceedingly alarmed parents, and sometimes perplexed the younger part of the profession. Of this kind are affections of the breasts in female children, previously

to, or about the time of their beginning to enlarge. At this period, they sometimes become very painful, and upon examination, a hardness and swelling are discovered, and in some instances, sharp points may be felt, which are very painful when pressed. The hardness is deep seated, around and behind the nipple, and is sometimes loose, at others somewhat fixed, and attended with severe lancinating pains, which have given rise to disagreeable suspicions in regard to the probable nature of the complaint; and would, indeed, at a more advanced age claim serious attention. When happening in families addicted to scrofula, that disorder is naturally suspected, and sometimes a morbid schirrhus has been feared. In some instances, only one of the breasts is affected, and after some months, the other, or sometimes both nearly at the same time.

A VARIETY of alterative medicines, aided by topical applications, have been administered in different instances, and continued for several months. These have  
some-

sometimes taken away the pain, reduced the tumour, and diminished the hardness; but have, in no instance, entirely removed the complaint. Yet no evil consequence, in any instance under my eye has ever ensued, in patients at the above mentioned age; nor have I heard of any from other practitioners, though it has sometimes been seriously apprehended.

The result of the whole has shewn, that the remote cause of the complaint has originated in an irritability of habit, in connexion with that distention of the parts, which at a certain age, nature always promotes.

The design of this chapter being to hold forth encouragement, from the probable harmless nature of the complaint, it were needless to point out the means, that on different occasions, have been, sometimes unnecessarily, employed. I shall remark only, that keeping the body open and cool, with every other attention to the general health, must in every instance be proper.

*ABSCESS in the HYPOCHONDRIUM.*

**C**HILDREN though less liable to this disorder than adult persons, are sometimes attacked by it at an early age. It commonly arises from falls, or blows received on the part, or from lying on the grass, and other similar occasions of a cold in the bowels. It is always attended, and sometimes preceded by alvine complaints, and not unfrequently by the true cholera. In either case, there is always a pretty early appearance of tumour near, or upon the regio pubis, accompanied with great tenderness and pain, especially to the touch.

THE intentions of CURE are directed to the pain, fever, and state of the bowels. To these ends, the antiphlogistic plan is to be pursued, in order, if possible, to prevent suppuration. Therefore, soft opening medicines are required, such as castor-oil, infusion of fenna with oil of almonds and manna, and such like ; with frequent clysters,

ters, and afterwards opiates, and saline draughts, as the degree of pain and fever may demand. The part affected should be fomented externally with the decoct. papav. albi, leeches should be applied once or more, and afterwards a blister, if no relief be obtained, and the external tumour be not in the mean time increased. But if the parts become more swollen, a large bread and milk poultice should be applied, and changed two or three times every twenty-four hours; and the matter let out as soon as may be. The suppuration being between the muscles and the peritoneum, there will not be much discolouration of the skin, as is the case when matter is formed in the cellular, or adipose membrane, above the muscles. Such a change therefore, must not be waited for; but an opening made as soon as any fluctuation can be perceived, lest the matter should make its way into the abdomen, or produce sloughs and a foul ulcer. After the matter is let out, no other application is usually required than



70      **PSOAS, or LUMBAR ABSCESS.**

the same kind of soft poultice. The bowels must likewise be kept open by the gentle laxatives before mentioned, and the diet be very light, and of easy digestion; which should be continued for sometime.

**PSOAS, or LUMBAR ABSCESS.**

**F**REQUENTLY as this disorder takes place in adults, it is as often met with in younger subjects, and even such as are only four or five years of age; and must therefore be ranked among the diseases of childhood.

It is a true chronic inflammation, and like the last mentioned complaint, is often occasioned by bruises, strains, or lying on damp ground; and is not uncommonly connected with a scrofulous taint of the habit. The inflammatory symptoms being rarely severe, suppuration takes place slowly, and many months elapse before the

the matter can be felt externally; which sometimes points high up about the loins, hip, or groin, and at others, above the middle and on the inside of the thigh: in the most benign, the abscess frequently bursts in the groin. It is, in any case, a very dreadful disease, and is noticed here, for the sake of pointing out to young practitioners the first symptoms of this insidious complaint, and marking the outlines of a practice which has proved the oftenest successful.

A slight lameness and shortening of one of the legs, is, usually, the first symptom. In a little time, the thigh is observed to be bent forward and upwards, which gives an appearance of depression to the glutæi muscles. But its most characteristic mark, in its early stage, is a sensation of weakness in the loins, with a tenderness about the origin of the psoas muscle, manifest upon a careful examination of the parts.

THE first indication is to procure a resolution, if possible, upon, the approach of these first symptoms, and before those

of a hectical nature supervene; but unfortunately, they are too often overlooked, or mistaken in the beginning.

With a view to a resolution of the inflammation, recourse should be had to bleeding by leeches, and cupping; by blisters, issues and setons; by emetics; purging with calomel; by the warm bath; a supine posture, and low diet; and sometimes, a caustic, or quicklime mixed with honey, applied near the lumbar vertebræ; but above all, as lately recommended, by electricity: a stimulus, which in all affections of the joints, previous to the formation of pus, is, perhaps, the most successful.

Should these means fail, or advice be sought for too late to expect any thing from them, of no less consequence is the treatment, after the matter is formed; which should be evacuated, by an artificial opening, as early as possible, and by a very small aperture. If the abscess be large, one or more setons may be employed, in order to prevent the matter  
being

being too suddenly evacuated, as well as to keep up a beneficial stimulus, to induce the cavity to fill up. By these means, (which contain considerable improvement upon the ancient practice,) several very unpromising cases have been recovered; but it would be unjust not to notice, that a more important improvement has been made by Mr. ABERNETHY, which is peculiarly adapted to very large collections of matter, and seems likely to render this disease, for ages usually fatal, far less untractable.

THE principal circumstance in this plan; is the making a small opening in such a manner and oblique direction, as to be capable of being closed again after having given vent to the present collection of pus; and repeating the little operation at such intervals, and as often as shall be necessary. But for further information the reader is referred to the tract itself; it being both beside my purpose to enlarge, and would be unjust to add  
any

any thing that might induce him to overlook the accurate account with which Mr. ABERNETHY has favoured the public.

NEVERTHELESS, as it is certainly the duty of every writer to offer what he accounts the best information, it becomes me to observe, that Mr. ABERNETHY's reasons for emptying the cyst both at first, and on every subsequent opening, are, at least, controvertible. It has been thought by others to be an improvement to let out only a part of the matter in very large collections of it. And I have myself known some, and heard upon good authority, of other cases, in which the latter method seems to have the preference; none of the evils from the distention of the cyst, which Mr. ABERNETHY suspected, having taken place.

Mr. ABERNETHY, however, as it appears from a more recent publication, retains his opinion, as the result of experience, and is now not anxious about the obliquity of the aperture. He, nevertheless,  
closes

closes it carefully, and assists its healing, and makes a fresh puncture as often as the abscess shall fill to a certain degree.

This sentiment is submitted to the public upon Mr. ABERNETHY's authority, having had no reason myself for altering my opinion; the only case I have seen since my former edition, in which the whole of the matter was evacuated, did not succeed.

Mr. ABERNETHY is further of opinion, that opium administered at regular intervals, and in doses suited to the occasion, has been very useful in mitigating the pain and irritability of the abscess, and in consequence, the corresponding hectic fever.

WHEN the abscess has been some time opened, the diet should be changed for one more cordial and nourishing, and the bark, steel, or vitriol be administered; and the patient enjoy a pure air, and take such gentle exercise as his situation will admit of without an increase of pain.

I HAVE

I HAVE only to add, under the sanction of a solitary case yet pending, that nature will endeavour to relieve herself, even in this dreadful disease, by absorbing the pus, very many months after a large quantity has been formed. In this instance, wherein a lady was long confined to the house, and chiefly to her bed, through extreme weakness, and the weight of the limb; the size of the tumour is very considerably diminished, the appetite greatly returned, and the use of the limb so restored, that she is able to walk abroad, and partake of the ordinary comforts of convalescents who are yet in a weak state.

## MORBUS COXARIS.

A VERY similar, and equally dangerous disease with the above, is the MORBUS COXARIS, or abscess of the hip-joint; a complaint differing only in the precise seat of the disease. The swelling and pain  
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are here, indeed, more circumscribed, and the abscess always gives way near the region of the joint. The preceding symptoms and treatment, however, much resemble those above mentioned. But the equivocal nature of the first appearances, and the difficulty of ascertaining the probable degree of subsequent injury, are such as will not allow of a discussion in detail in a work of this sort.

I SHALL observe, however, that a degree of lameness is frequently the first thing noticed; and a short time afterwards, both the thigh and the calf of the leg become sensibly lessened. The patient also doth not stand equally on both legs, and the affected one projects outwards from the body; and in the end the thigh becomes shortened. It is generally attended with a severe pain in the knee, and very early an uneasiness in moving the head of the thigh bone in its socket. It occurs from infancy to manhood, and often derives its origin from trifling accidents. It is frequently at its first appearance mistaken for  
other



other disorders; accordingly, the paleness, languor, and listlessness that follow the first symptoms are often attributed to worms, and the tumour itself considered simply as scrofulous; whence an erroneous practice is frequently adopted. It is, moreover, mistaken for rheumatism and sciatica in adults, and in children, for indolence and trivial accidents.

On the head of treatment, I shall only observe, that in a view to procuring a resolution, which is the first intention, the means can differ but little from those prescribed for the foregoing complaint; and we have the authority of the late Mr. POTT\* for expecting considerable benefit from issues or setons, applied in the manner directed for the palsy of the lower extremities. Should an abscess, nevertheless, be formed, its after treatment must vary considerably according to the degree of injury of the joint, and adjacent parts. Nothing, however, will

\* See *A short account of his life*, by Mr. EARLE.

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*ABSCCESS under the FASCIA of the THIGH. 79*

contribute more to the cure, than long and strict rest of the limb.\*

*ABSCCESS under the FASCIA of the THIGH.*

THE nature of this deposit is so much of a kind with the two preceding ones, as well as so much less dangerous, that it would be needless in this work, to do much more than mention it in its place.

Mr. ABERNETHY is of opinion that the whole of the matter should in this case also be evacuated, and by a larger opening than for the lumbar abscess; and does not, therefore, advise a reunion of the lips of the orifice. I have, however, seen the method which I have noticed as successful in the former, equally so in this abscess; and from the result in one very bad case, am disposed to think, there may be considerable advantages in closing the

\* For a full account of these abscesses, readers are referred to a Treatise by Mr. E. FORD.

aperture,

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aperture, and making fresh punctures as the matter shall collect.

## WHITE SWELLING *of the* JOINTS.

I SHALL be equally brief also on this article, the disease being well known to every surgeon; and my intention in naming it being only to mention, from experience, a few remedies that have been found successful in young subjects, if had recourse to in good time, and before matter has been formed. Such are, the repeated application of eight or more leeches, and afterwards small blisters to the joint; gentle frictions of the part; two or three vomits a week; with entire rest of the limb; and in the end, sea-bathing, especially if the patient be of a scrofulous habit. It has been said, that a poultice of boiled turnips, with a lump of hogs-lard, applied twice a day, has, in several incipient cases entirely removed the complaint. And in a few instances  
that

## PARALYSIS of the LOWER EXTREMITIES. 81

that I have known, electricity has had an immediate, and wonderfully good effect, even where the joint has been considerably enlarged, the pain very great, and the child incapable of straightening the limb.

## PARALYSIS of the LOWER EXTREMITIES with CURVATURE of the SPINE.

THIS complaint has been of late years so thoroughly announced, that it should seem unnecessary for most readers to enter into a minute detail of it after the accurate description given by the late Mr. POTT, whose early account and judicious treatment of this dreadful disease has added lustre to the reputation acquired by his former publications. Some late observations have, indeed, seemed to detract both from his merit, and expected success; I can, nevertheless, from my own experience vouch for the great utility of the plan in this morbid deformity.

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## 82 PARALYSIS of the LOWER EXTREMITIES,

It will be proper, however, carefully to distinguish it from the simple curvature of the spine, in which a greater number of vertebrae is concerned, and the legs are not peculiarly affected; as well as from a complaint presently to be noticed, under the name of *debility* of the *lower extremities*, in which there is no manifest change of figure in the spine.

THE Palsy of the lower extremities is certainly confined to no age, and being at first very frequently mistaken in young children for the trifling effect of some fall or strain, is intitled to peculiar notice in this work. I have never met with it, indeed, where it has not been preceded by some fall or violent exertion, though as Mr. POTT has observed, such supposed accidents are seldom much noticed previous to the debility taking place; though it is, indeed, probable, there may be some predisposing cause, without which no common strain would induce so much mischief in a part continually exposed to accidents,

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The Curvature is generally in the neck or back, though sometimes in the upper part of the loins, and varies in extent and degree according to the number of the vertebræ that may be affected. The first symptom noticed by children of an age capable of expressing their feelings, is an increased sensibility, and irregular twitchings in the muscles of the thighs. This is succeeded by a dislike to motion, especially to moving briskly; the patient on such occasions finding himself likely to fall, his legs getting entangled through their weakness, and a disposition to cross each other, in his attempts to step forward. Soon after this, he perceives himself unable to stand upright long together, and that the legs and thighs have lost much of their natural sensibility. Matters seldom continue long in this state, and the weakness increasing, patients lose more and more the use of both the lower extremities, till some are unable to move them at all even in bed; and these advances of the disease are said to be more

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rapid in adults than in infants. In the latter, I have particularly remarked that rigidity of the ankles noticed by Mr. POTT, by which the toes are pointed downwards, so that the heels cannot be brought to touch the ground.

As my intention is only briefly to point out the disease, and the properest means of relief, it is not of importance to enter into a further detail of the progress of this disorder, and of other complaints which are induced by it whenever the original disease has been long neglected.

THE obvious Remedy is that first happily suggested by Mr. POTT, and is nothing more than a large issue or seton placed on each side the curve, at such a distance as may prevent their bursting into one. Where the curvature comprehends three or more vertebræ, the seton may be preferable to an issue, but if the latter be on any account elected, I should advise its being made by the knife rather than a caustic; not only as being less painful, but also for the very effect

effect Mr. POTT has disapproved of, I mean, the consequent inflammation before there has been time for suppuration to take place. It may, indeed, be doubted, whether the benefit derived from the issue may not arise rather from the inflammation and stimulus produced on the surface, than from the discharge; to which, nevertheless, Mr. POTT solely attributes the cure.\* In a recent case, however,  
and

\* It has been a common idea, that the discharge furnished by an ulcerated surface is the source of all the benefit that may be derived from abscesses, unless blistered surfaces be an exception; in regard to which, physicians have usually considered the stimulus produced by the cantharides as the chief mean of benefit, especially in cases of great local pain and inflammation. It is, indeed, matter of some surprize, that thinking men have not more generally adopted the like idea in regard to other inflamed surfaces, whether induced by natural or artificial means. It should surely seem, that *that* state of the system, or of the parts, by which suppuration is induced, is more likely to be the occasion of benefit, than the discharge of a large portion of the richest animal juices, which is but the consequence of the other. Thus, in most critical abscesses, the fever is found to abate as soon as



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and a very unpromising one, in an infant ten months old, a very sensible relief was afforded as soon as the inflammation took place, and before any suppuration appeared; and though the child had been many months a cripple, with loss of health and appetite, unable to support its head, and the sternum very much distorted, the relief was so great in one week after the incisions were made, as left no room to doubt of a perfect recovery; which accordingly took place a short time afterwards, without any deformity remaining. Had Mr. POTT advanced any other reasons for the preference given to the caustic, or merely asserted such preference, I

the external inflammation takes place, and the patient instead of being afterwards benefited by a copious discharge is not unfrequently hurried by it into a fatal marasmus, when the abscess has been large, or improperly seated. There may be other instances, indeed, in which the suppuration, and even the great quantity of the discharge, may be beneficial to the system; but it is probable, that this is not in general the case, and much less in the present instance, which is attended with symptoms of general debility.

should

should readily have submitted to the great experience he has had in this dreadful complaint; but though I may very possibly be mistaken in my reasoning, it appeared a duty just to state it, as well as to notice this instance in point, in a disease of so much importance.

The issues should be kept open till the patient perfectly recovers the use of his legs, or even a while longer, at least one issue, which ought not to be dried up till the patient can walk firmly alone, and shall have recovered all the height which he may have lost in consequence of that stooping which the disorder had induced.

In addition to the use of these means, Mr. POTT has suggested those of cold-bathing, frictions, the bark, and such like; but I have myself never seen any benefit from any thing where the issues have failed, which I have found efficacious where no other remedy has been made use of. After the recovery, how-

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ever,

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ever, if the patient is of a scrofulous habit, sea-bathing is peculiarly indicated. The *moxa* has been successfully made use of in one instance, by Mr. GIMÈS,\* after the caustic, as directed by Mr. POTT, is said to have failed. But as the burning was several times repeated, and the recovery appears to have been unusually slow, it is not very certain, but a repetition of the caustic might have proved equally beneficial.

## DEBILITY of the LOWER EXTREMITIES.

THE disorder intended here is not noticed by any medical writer within the compass of my reading, or is not so described as to ascertain the disease. It is not a common disorder any where, I believe, and seems to occur seldomer in *London* than in some other parts. Nor am I enough acquainted with it to be fully satisfied, either in regard to the true cause,

\* *Jour. de Med. Fev. 1788.*

OR

## DEBILITY of the LOWER EXTREMITIES. 89

or seat of the disease, either from my own observation, or that of others, except in the instance of teething, or of foul bowels; and have not myself had an opportunity of examining the body of any child who has died of this complaint. I shall therefore only describe its symptoms, and mention the several means attempted for its cure, in order to induce other practitioners to pay attention to it.

If it arises from teething, or foul bowels, the usual remedies should be employed; and have always effected a cure. But the complaint more commonly seems to arise from debility, and usually attacks children previously reduced by fever; seldom those under one, or more than four or five years old. It is then a chronical complaint, and not attended with any affection of the urinary bladder, nor with pain, fever, nor any manifest disease; so that the first thing observed is a debility of the lower extremities, which gradually become more infirm; and after a few weeks are unable to support the body. There being no signs of worms, nor other foulness  
of

## 90 DEBILITY of the LOWER EXTREMITIES.

of the bowels, mercurial purges have not been of any use; neither has the bark, nor hot, nor cold-bathing. Blisters, or caustics on the os sacrum, and the great trochanter, and volatile and stimulating applications to the legs and thighs, have been chiefly depended upon; though there is no appearance of an enlargement of any of the vertebræ, nor of suppuration in the external parts, and therefore no resemblance to the inflammation of the intervertebral cartilages, the psoas abscess, nor the morbus coxaris of *De Hæn.*

When only one of the lower extremities has been affected, the above means, in two instances out of five or six, entirely removed the complaint: but when both have been paralytic, nothing has seemed to do any good but irons to the legs, for the support of the limbs, and enabling the patient to walk. At the end of four or five years, some have by this means got better, in proportion as they have acquired general strength: but even some of these have been disposed to fall afterwards

## DEBILITY of the LOWER EXTREMITIES. 91

wards into pulmonary consumption, where the debility has not been entirely removed. On this account it may be suspected, that the complaint is sometimes owing to scrofula: and I have been very lately informed by a gentleman of character in the country, that he has seen one instance of a paralysis, or debility of this kind, in which, upon opening the body after death, the internal surface of the lower vertebræ lumborum was found carious, though there was no abscess of the psoas muscle, nor external tumour on the back, nor loins.

I HAVE seen a similar debility seize grown people, especially women, after some very long illness, and has continued a year, or more; during which time they were utterly incapable of walking without the help of crutches. These cases, however, have always been attended with great pain in the commencement of the complaint, though without tumour of the limbs; and have seemed to be benefited by the external use of the waters at *Bath*.

Disco-

DISCOLOURATION, *accompanied with* DEBILITY *of the LIMBS.*

**A**TTENDANT upon debility of the lower extremities, there is sometimes a discolouration equally distinct from those already mentioned, and another yet to be noticed. It takes place at a more advanced age, and seemingly in consequence of previous bad health. I know of no writer who has noticed such a complaint, and have not met with it often enough to be distinctly acquainted with its nature; nor have I, as yet, fairly seen the result.

Children so affected have gone off their feet, as it is called, or dragged them only very feebly, after having been able to walk stoutly for some time. They have become in every respect weak and languid; their head has grown large, and their limbs become emaciated, but do not feel cold to the touch, though of a deep leaden-blue colour from the fingers  
and

and toes to the elbows and knees ; with the face almost equally discoloured, and like that of adults in a fit of asthma. A fall, or such like accident, has sometimes been suspected as the cause of these symptoms, but unsupported by any appearance on the vertebræ, or other parts.

THE bark and cordials have been made trial of without any advantage ; and cold-bathing has seemed to be prejudicial. The application of leeches to the livid parts, friction, spirituous and volatile embrocations, and blisters ; repeated electricity ; tepid sea-bathing ; steel, exercise, and a generous diet, are the means I have hitherto directed, after purging with calomel ; but as yet, I have said, I am not able to state their certain effects.

IN several instances, a discolouration of this kind, appearing only at times, and recurring again, during many months ; attended with cough and occasional difficulty of breathing ; has disappeared totally as children have acquired general strength and good health, without any  
mani-



manifest advantage from the means that have been used.

*CURVATURE of the BONES from WEAKNESS.*

**C**ROOKEDNESS of the bones, particularly those of the lower extremities, has been mentioned as a common consequence of rickets, and may claim a transitory notice.

THE principal inquiry in the treatment of deformities of this kind, respects the use of irons for the support of the limbs, whenever the distortion happens to be considerable. The propriety of this assistance has, indeed, been doubted by some practitioners, as well as their unpleasant appearance objected to by parents; who have therefore been inclined rather to trust only to cold-bathing. Friend, however, as I am to the latter, I may venture to say from experience, that it is likely to be prejudicial at the time it is often  
had

had recourse to; for by strengthening the system, it rather serves to confirm the crookedness which the bones have already contracted. It is an advantage, on the other hand, that the bones remain soft and yielding as long as the curvature is considerable, if so be the pressure of the superior parts be at the same time duly counteracted. To support the limbs, therefore, with irons, as long as the softness of the bones disposes them to yield under the weight of the body, is certainly a rational intention, and has been very beneficial in numberless instances. This end obtained, the bones being still lengthening as the child grows up, they naturally incline to become straight; and at this time the cold-bath and other tonics are properly indicated, and will co-operate to the cure of the complaint. The only care required, is, that the irons be made as light as possible, and be properly adapted, and that they be lengthened as often as may be necessary. It is,  
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possibly, for want of due attention to this last particular, that irons have in some instances been really found to do harm; the reason for which must be obvious to every one.

WHEN a curvature takes place in the spine; (without any disease of the vertebræ or cartilages) the like method should be taken. Proper instruments to support the head and upper parts of the body have been contrived by different artists, but those made by Mr. JONES appear to be the best. There is, indeed, a slight disposition to this curvature in some children of a scrofulous habit, that does not require so inconvenient an instrument; and for which the stays made by LAURIE and HOLMES in Bartholomew Close may therefore be preferable.

SHOULD the bones of the arm be curved, either by accident or disease, in this soft state, rollers and pasteboard splints properly applied, will be sufficient to support, and restore them to their natural form.

But

But if the injury extend to the hip and contiguous bones, it will not be manifest at the time; and when discovered, can be benefited only by the cold-bath, and other general remedies. If this distortion should be considerable, it may, indeed, become a source of manifold evils in females, as will be noticed in another place.

## PARONYCHIA.

**M**ANY young people are very subject to a mild species of this complaint, which being perfectly superficial, is not improperly termed the cutaneous whitlow, and will attack the ends of the fingers, several times in a year, without any previous injury of the part. The subject is therefore introduced here chiefly with the design of recommending a prophylactic which I have frequently seen successful. This consists only in bathing the fingers, several times a day, in the following

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mixture, the moment that a sense of any perternatural heat, or pain, shall be felt.

R. Misturæ camphoratæ ℥iv.

Ag. litharg. acetati ℥ij

Tinct. opii ℥β

Misceantur.

IN the malignant, or deep seated whitlow, doubtless, the best method is to make an early opening down to the bone, which will occasion the patient much less pain, than allowing the matter, gradually, to make its own way to the surface; which is likewise always attended with much mischief to the parts.

I shall only add, that in the commencement of the tumour and pain, nothing can be more improper than the recourse so commonly had to a bread and milk poultice; instead of which, where poultices are required, those made with the water of acetated litharge are abundantly preferable, and should be applied only very moderately warm.

FURUN-

## FURUNCULUS.

**T**HE common Boil only is intended here; and is noticed from its frequency in young people towards the time of puberty, who are sometimes vexed with a succession of them. This is the true phlegmonic inflammation, and is therefore most acutely painful, and the skin of a deep red colour before the suppuration is complete. Though oftentimes hurtful in older subjects, they are, however, justly accounted salutary in others, and do harm only when repelled, or hastily dried up. If a poultice of bread, and milk, therefore, be applied from the first; (if the boil be in a convenient part, otherwise a gum-plaster); and the abscess dressed with any warm digestive as soon as the skin gives way, the slough, which the boil always forms, will soon be thrown off. It is sometimes for the want of this,

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that

that another boil forms in the neighbouring parts, or the child is teased with fore eyes, or some humour, as it is termed, on the skin.

Two or three doses of purging physic may be taken, at proper intervals, after the boil is healed.

## PERNIONES.

**T**HIS is a complaint so well known, that it can need no description. It is generally owing to the circulation of the blood in the minute vessels of the extremities being checked, by a child having been long exposed to cold or wet, and afterwards running to the fire instead of recovering the natural heat by general exercise, and friction of the parts affected. If the injury be exceedingly great, as it sometimes is when a person has lain for several hours in the snow, the circulation cannot always be restored, and some parts actually

actually mortify. To prevent this, if possible, instead of bringing the person near a fire, he should be immediately stripped, and well rubbed all over, especially the parts most affected, with snow, and afterwards with salt and water, and be then put into bed. If neither snow, nor ice be to be had, cold water should be made use of, or flannel sprinkled with spirit, or volatiles. If the parts be turned black, which they often are when they are what is called frost-bitten, the patient, especially if a young child, should be confined to the bed, as long as the weather is severe, and the parts continue discoloured. But my intention is to treat chiefly of slighter attacks; on the first appearance of which, known by the heat, itching, redness, and swelling of the heels, toes, or fingers, the parts may be well rubbed with a soft brush, or soaked in smiths forge-water, and afterwards rubbed with mustard and brandy, soft soap, or salt and onions; or they may be embrocated with the liniment. saponis,

H 3

or



or spirit. camphoratus, to two ounces of which may be added a tea-spoonful of the aqua litharg. acetati. But I have, for some years, experienced the good effects of far simpler means than any of these, and which I have hitherto never found equalled by any of the warmer remedies alone. It may, indeed, be made use of together with them ; and is nothing more than the cerat. sperm. ceti spread on a large piece of thick lint, or the emplastr. saponis on cloth, to be applied as soon as the extremities begin to itch, or be painful: or if this should not very soon be of use, both embrocating, and covering the parts with compresses wrung out of the aqua ammoniæ acetatæ, which should be continually preserved moist.

SOME children are disposed to have chilblains every winter ; as a preservative against which, if it be the hands that are liable to be affected, warm leather gloves should be worn, (avoiding woollen, which in these cases is unfriendly to the skin ;)

skin;) and above all, wearing for a few hours in the day or night, and especially when abroad in the cold, oil'd-silk gloves, which is one of the best preventives both of chilblains and of chopped hands, that has been hitherto known. But if the feet are usually the affected parts, the heels only may be covered by a piece of washing-leather, and over this a piece of oil'd-silk, secured round the insteps, and worn day and night during the cold months; and should be taken off only for the purpose of washing them, and rubbing the parts with the brush or liniments, as mentioned above.

WHEN the swellings are broken, it is common to dress the sores only with a little cerate, and to wait for the return of warm weather, when they usually heal of themselves; but by this means, they often remain bad through all the winter, and when large, are sometimes not well till the summer is very far advanced; and I have even seen them remain very

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bad

bad both in children and grown people, at the end of *September*.

After having attended great numbers in this complaint, I am satisfied that this kind of sore requires applications somewhat more invigorating, being a species of mortification; and though it will not always endure very warm digestives like many other ulcers, yet when the chilblains are pretty large, a portion of some digestive joined with the cerate, is very friendly to them. And I have known some sores, though very small, which had remained in a very obstinate and tedious state long after the breaking up of a hard frost, whilst they had been dressed only with cerate, or other mild, or drying applications as they are called, begin to heal immediately upon adding a small portion of some warm digestive, and applying a flannel roller, without any other alteration in the plan. But if they are spread to any considerable size, nothing contributes so much to their healing, as touch-

touching the sores every day with bracing and invigorating lotions, particularly, diluted solutions of steel, or tincture of myrrhe; which in a very few days will produce kindly granulations in these, and other cold sores, though of long standing.

WHEN the parts are much swollen, and the sores been long foul, it will be often necessary in severe weather, to make use of poultices, of which those made of rye-meal and the compound water of acetated litharge are more active, and therefore preferable to bread and milk: the latter however, if a little brandy be added to it, answers very well in many cases. If these are applied over the above dressing of cerate and digestive, and changed twice a day, the sores will heal in much less time than by any of the common applications I have seen used; especially if the parts surrounding the sore be well rubbed with camphorated spirit. If children be not very young, purging them with a little calomel twice a week, will

will often expedite the healing of the sores: in the worst cases, a decoction of the bark, as well as cordials, and a generous diet, are required.

I have now for many years had strong proofs of the good effects of electricity in chilblains, both as a remedy and a prophylactic, especially in very old people, many of whom are afflicted with them every winter.

#### AMBUSTIONES.

**B**URNS and scalds are mentioned by some old writers, and though a misfortune by no means confined to young people, they too often fall to the lot of infants, through the carelessness of their attendants: and for want of being properly treated at the instant, children often suffer exceedingly, when a fit application would have rendered the injury trifling.

WHEN

WHEN such an accident happens, the nearest astringent at hand should be made use of, such as brandy, or other spirit, wine, or even cold water, till something more proper can be procured; into which the injured part should be plunged, or be covered with pieces of cloth dipped in such liquors, which will prevent the blistering of the part; or, in the momentary want of any of these, holding the injured part before a moderate fire. As soon as it is possible to procure officinal remedies, the following will be very proper.

R. Aq. calics LBj.

—— litharg. acetati ℥β

Spir. vini Gall. ℥ij.

Misceantur.

Where ice can be conveniently applied, and renewed day and night, it will be found one of the best early remedies in very bad cases.

If the injury has been too long received to admit of much relief by these means, and deep sloughs are actually formed, a very proper dressing may be made of  
equal

equal parts of cerat. è lapide calamin. and unguent. sambuc. viride; diminishing the proportion of the latter as the sloughs shall be thrown off, and the sores become disposed to heal. But should the injured surface be large, or the pain occasioned by removing the dressings, be very great, it will be sufficient to cover the parts with pieces of linen dipped in cold-drawn linseed-oil, which should be moistened every day, and suffered to adhere till the sores are in a state to admit of being dressed in a common way.

A STRONG solution of soap in water has long been in use with artificers employed in any business exposing workmen to very bad scalds; and is a very excellent remedy.—About three quarters of an ounce of soft soap is a proper quantity for a pint of water. But the soap taking some time in dissolving, and requiring a certain proportion of boiling water, the lotion cannot be made cool enough for immediate use by the addition of the proper quantity  
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of cold water ; a remedy, therefore, more convenient, and perhaps more efficacious, may be made of ol. oliv. aq. fluv. frigid. and aqua kali puri. Six ounces of oil to ten of water, with two drachms of the ley will make a pint.—This quantity may be sufficient for a burn on the hand or foot ; which is to be immersed, and kept about half an hour in the liquor, which will remove the injury if had recourse to immediately ; but must be repeated, as the pain may require, if the scald or burn be of some standing. Could a person scalded all over, be instantly put up to the chin in a cold-bath of this kind, and the head, at the same time, be frequently immersed, or well washed with the liquor, I believe very little injury would ensue.—Whatever sores may be formed, should be treated afterwards according to the foregoing directions.\*

LUXA-

\* For some new ideas on the nature of burns and their treatment, the reader is directed to an *Essay*, written by Mr. KENTISH, 1797.

As



*LUXATIONS and FRACTURES.*

**I**NFANTS are not only liable to these misfortunes by a fall from the lap, but the bones, or joints, may sometimes be unavoidably injured in the birth. There is in this case, feldom any luxation, I believe, but of the shoulder; which is not difficult to be reduced, and requires nothing afterwards, but that the limb be kept perfectly quiet.

It is very common for nurses, especially during the month, to support the lower-jaw of an infant whenever it happens to yawn, in the apprehension that the jaw might otherwise, be dislocated. This practice is, at least, an evidence of the nurse's

As a more curious novel devise in a view to lessening the pain and inflammation consequent to burns, the metallic tracters of Dr. PERKINS, to which such marvellous effects have been attributed, can be mentioned only in the way of caution not to depend on them.

atten-

attention, and can do no harm, though I have, indeed, never known the accident happen. Should it, however, take place, either at this age, or in older children through some violence, it will occasion a very awkward appearance, and prove very distressing to the child, who will be disabled from taking any nourishment till the luxation be reduced. Nothing more, however, is required to this end, than to place the thumb of each hand in the back of the mouth, and the fingers on the outside, under the jaw, so as to depress, and at the same time bring it a little forward, to disengage the head of the condyle, and then force the jaw suddenly back.

.. FRACTURES, indeed, are not quite so easily managed as luxations, and perhaps happen more frequently. The bones are yet but little more than gristle, and if strained beyond a certain degree, are easily bent, or even broken. The former is very readily restored, but I shall be more particular

particular on the latter, as the subject is of some importance.

FRACTURES in the birth are usually of the collar-bone, the arm, or the thigh; the treatment of the two former of which, will include all that is necessary to be observed of such as may happen in other parts.

The first, however, requires very little attention, as it will be necessary only to draw the shoulders back, confining them in that posture, by two or three pins in the clothes, and to apply a piece of the empl. litharg. cum resina, or emplast. sa-ponis, spread on leather, upon the rising end of the bone, and a larger piece over the first.

A FRACTURE of the arm demands a little more attention, but will always end perfectly well. The difficulty consists in keeping the fractured ends of the bones apposed to each other, without rolling up the arm so tight as to occasion pain, or much swelling of the hand, which in a new-

new-born infant, a very small pressure will effect. I have found no method so well adapted as the following, which allowing of a little tumour about the fractured part, without the necessity of loosening the roller, preserves the ends of the bones in due contact, without drawing the roller so tight as to prevent the free return of blood from the inferiour parts of the limb.

To this end, three little splints, about half an inch in width, and an inch and a half long, may be made of fine linen cloth, five or six times folded together, to the thickness of common pasteboard; and being soaked in a mixture of flour and white of egg, should be placed in the usual manner, along the fractured ends of the bone. Being applied wet, they will accommodate themselves exactly to the figure of the limb, and when become dry, will be sufficiently strong to support the bones. They should be applied immediately on the skin, without the intervention of a roller, by which means, when

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the parts swell, which they should always do a little, there will be space enough between them to allow of it, notwithstanding the pressure from the roller; which should be applied over them. This ought to be of very fine flannel, and should not be drawn near so tight as for adults, nor will there be occasion for it, as the chief dependance ought to be on fastening the arm down close to the side, by strong pins fixed into the little gown, in the manner the surgeon may best contrive at the time. The gown, therefore, ought not to be changed, nor the arm moved, but in his presence: and if the hand be not inflamed, nor very much swelled, and the child continue easy, the part will not need to be opened under eight or ten days. Till this time, the same gown should be worn, and be preserved clean by such coverings as may be easily removed. The speedy union of the bones will depend upon a strict attention to keeping the limb as still as possible; and if it be so preserved, the accident will afford very little

little trouble after the first ten or twelve days, and at the month's end, the child will move that arm nearly as well as the other.

### On CUTTING the TONGUE.

THE directions on this head, as well as the notice taken of many of the following little disorders, proceed rather from a desire that nothing on the subject of children's complaints should be omitted, than from their real importance. Some of them, indeed, have been entirely overlooked by preceding writers, and though they may seldom require much attention, it may sometimes be of advantage to know what has been serviceable in similar cases.—The instance under consideration, however, is too trifling a matter to dwell upon. And, indeed, the little operation, performed in order to lengthen the tongue, is very frequently called for where there

is no absolute occasion for it, the confinement being seldom so considerable as to make it really necessary to divide the frænum. The child will suffer so very little, however, in the operation, that when it is carefully done, it will be attended with no inconvenience; and if it can afford the mother any satisfaction, it will be very proper to comply with her request. It seems therefore only necessary to add, that some little care and steadiness are required, or the sublingual veins may be wounded, and in consequence an infant may lose its life. To avoid this danger, the bridle may be divided by a small curved bistoury, instead of scissars. The handle and blade, when open, need not exceed two inches in length, and the point should be a little curved, and the back made broad, whereby the point may be easily forced through the frænum in the most troublesome case, whilst the back of the instrument will sufficiently press down the veins, so as to be entirely out of the way of being injured.

## SUFFOCATION *and* HEMORRHAGE. 117

jured. These cautions have been judged by some people to be very trifling; but besides that infants have actually bled to death; the following equally fatal accident has arisen from cutting too deep, which I shall therefore notice in this place, as well as describe an instrument contrived for suppressing the bleeding.

### SUFFOCATION *from* SWALLOWING *the* POINT *of the* TONGUE, *and* HEMORRHAGE.

THE occasion of this accident, it has been said, is cutting too deep in dividing the frænum: I have here to notice its symptoms and remedy. The former are those usually attending strangulation, and come on suddenly, and without any probable cause but that of the tongue having been cut; but to which they are seldom attributed by those who are strangers to the complaint. The infant appears greatly agitated; the face turns black; and un-



## 118 SUFFOCATION ~~and~~ HEMORRHAGE.

less these symptoms soon disappear, the child goes off in a convulsion. But if they are presently removed, the infant is as suddenly well; though they generally return again, and have in several instances proved fatal.

Mr. PÉRIE \* has perhaps the credit of discovering the true cause of the complaint. The remedy consists in nothing more than bringing the tongue into its proper place, and if the infant be suckled, putting it immediately to the breast, which will give the tongue a natural direction. Should the child be brought up by hand, the tongue should be watched for some time, at least till the bleeding shall be stopped; the complaint taking place only in consequence of that being considerable, so as to become an inducement to the infant to continue sucking at the part.

WHEN the sublingual veins are actually wounded, the danger, it has been said, is

\* *Mémoires de L'Académie de Sciences.*

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considerable; and it is to Mr. Paris that we are again indebted for the best contrivance for suppressing this hemorrhage. The means consist only of a piece of ivory, in the form of a short fork; the prongs of which should be so placed as to press against the apertures in the veins, and the other end against the inside of the lower jaw, and should therefore be broad and somewhat convex, that it may keep its place.

HEMORRHAGE *of the Nose.*

**T**HIS complaint was hinted at in the chapter on Sneezing, and is likewise met with among the old writers, I shall therefore bestow a few words upon it, though it is not often of much consequence, I believe, before the age of puberty.

If a child be feverish, or otherwise unwell, the hemorrhage is often a mere symptom arising from the complaint un-

der which it labours; and will disappear upon that being properly treated. But a bleeding at the nose sometimes takes place in the healthiest children, the vessels of this part being weaker than those which are covered by the true skin, and often afford a salutary outlet, in case of plethora, and therefore usually contract when the intention of nature is answered; after which, a dose or two of cooling physic should be given. But it may be sometimes necessary to draw a little cold water up the nose, to which some vinegar may be added; to compress the nostril from which the hemorrhage arises; and confine the patient as much as may be to an upright posture. Should these little remedies fail, the head, hands, and feet, may be bathed with cold vinegar and water, and the nostrils be stopped up with doffils of lint, which upon urgent occasions must be dipped in warmed oil of turpentine, or other styptic liquor, and must extend to the posteriour aperture. The last means will almost always succeed;

ced ; but if otherwise, some blood should be taken from the arm, if the pulse does not forbid ; the feet be bathed in warm water, and the body kept open by manna, and cream of tartar ; and the patient should live for a long time pretty much upon whey, vegetables and milk ; at least, he should not dine wholly upon animal food.—In the intermediate days of purging, the testaceous powders, and tincture of catechu may be taken ; and in some instances the bark, or the *Nevil-bolt* water will be proper.

HEMORRHAGE *from the* NAVEL.

THE navel of new-born infants is liable to several disorders, some of which are of considerable importance ; but I speak in this chapter only of the slighter ones. Of these, one is an oozing of blood from the part, after an unkindly separation of the cord, and is owing to the shooting  
up

## 122. HEMORRHAGE *from the* NAVEL.

up of a soft fungus, which prevents the skin from covering the divided vessels in the manner it otherwise does. This rawness, however, is not always attended with hemorrhage, as will be noticed in the next chapter, but when it is so, the bleeding has sometimes continued for several months, and in some instances, in such quantity as to prove alarming to the friends of the child, lest it should in the end be injurious to its health. The little vessel from whence the blood issues, lies always so deep that it cannot be secured by ligature, nor be conveniently cauterized; the latter of which, indeed, would be very disagreeable. I have, however, conveyed the lunar caustic to the part, which has stopped the bleeding for a time; but it has always returned. Nothing further, however, is necessary, than to adapt a proper compress, and secure it by sticking plaster and bandage; which should be continued for two or three weeks; or it may be restrained merely by a small doffel of lint, and cross strips

strips of sticking plaster applied in the manner directed for the rupture at this part.

THERE is, indeed, another kind of hemorrhage of more importance, but this seems to be sympathetic, and is attendant upon infants who are in an ill state of health during the month, and is, perhaps, a bad sign. It takes place where the cord has been apparently well healed; but the skin afterwards gives way, and the bleeding is much more considerable than in the former. It requires, however, nothing more than the application of common styptics, with proper compress and bandage. The bleeding not appearing, in the least, to be critical, ought to be suppressed as soon as may be, and whatever complaint the infant may labour under, be treated according to its kind.

SORE-

## SORENESS, or ULCERATION of the NAVELE.

**T**HE care of this part has been so uniformly submitted to nurses, that unless some very unusual complaint has appeared, medical men have seldom been consulted. On this account, its disorders have rarely been mentioned by writers, nor probably have all the affections to which it is liable been known to them.

The separation of the cord is the work of nature, whose operations are usually performed in the best manner and time. It may be here remarked, however, that in regard to the time there is a considerable variety; a complete separation in some instances taking place in five days, and even earlier, and in others not till the fifteenth, or sixteenth. When so late, the funis is usually found hanging for some time only by a very slender filament, which if perfectly dead, as it usually is, ought

ought to be divided ; nature having herein failed of her intentions. From the neglect of this, a source of irritation and discharge is kept up, which I have suspected being the cause of some of the little disorders now to be noticed. In the last instance that I met with of a long discharge from the navel, I afterwards learned that the funis had been in the above state for several days, and had not dropped off till the fifteenth.

THE separation of this part, however, is not often followed by much soreness or pain, though there is frequently a true ulcer of the part. The common applications of a bit of singed linen cloth, a toasted raisin, and dusting the part with hair-powder, or the powder of ceruse, are usually sufficient for the common soreness consequent upon the separation of the cord. In some instances, however, the discharge is very great, and the part continues to appear raw, and indisposed to heal, or dry up. In such cases, I have often found three or four small  
pieces



pieces of a soft cabbage leaf one of the best applications. They should be laid one over another, that they may be preserved moist and cool, and should be continued as long as the discharge shall be considerable.

A MORE troublesome case is that of the part becoming sore, often some weeks after it has appeared to be healed; and as far as I have seen, (unless in some very bad cases presently to be noticed,) has taken place only where the skin of the belly has extended an unusual way on the cord, occasioning, as will be noticed in a subsequent chapter, a disposition to ex-omphalos. This soreness is likewise attended with much thin discharge, which disappears and returns irregularly, together with a raw appearance of the part; which is not many days in the same state. The bowels are in this case usually affected, and should therefore be carefully attended to, and proper remedies administered according to the nature and number of the stools; the part being at  
the

the same time covered with cabbage leaves, or with a poultice of bread and milk, or of aq. litharg, acetari comp. or the decoct. corticis, according as it may be healed, or otherwise; or the raw part touched, now and then, with the argentum-nitratum, blue vitriol, or pulvis lapid. caliminariis, as its appearance, and the quantity of discharge may suggest.

By one or other of these means, I have always found it get well, but sometimes not in less than five or six weeks, and then has usually dried up suddenly; until which time the infant has seldom thriven properly. In several recent instances, however, I have enclosed the raw part in a ligature; and this method has usually removed the complaint in a couple of days; and seems therefore always to be preferable where it can be effected.

But there is a much more alarming ulceration, which like the former, takes place some time after the part has been properly healed, and is, probably, always the consequence of some other illness, or  
general

general debility of the infant. In such cases, the sore has been found to spread over a great part of the belly, and even to mortify. Here very little can be done, I believe; all the instances but one, that I have known any thing of, having proved fatal, not so much from the local affection, or tender age of the subject, as from the original cause of the gangrene.

Whatever is found proper in a similar state of parts on other occasions, should be made trial of, such as fomentations, poultices, and a liberal exhibition of the bark and cordials; under the use of which, however, the infant rarely survives long enough to afford a due trial of their effects.

Mr. PEARSON, nevertheless, has informed me of two cases of this kind of ulceration, which took place in children turned of six months old; one of whom recovered, under his care, by the means above recommended, which were had recourse to as soon as the sore began to spread. The other case had been attended by another  
gentle-

gentleman, and was not seen by Mr. PEARSON till a short time before the infant died.

UNKINDLY SEPARATION *of the* FUNIS UMBILICALIS.

THE uncommonness of the appearance here intended may be offered as a reason for noticing it, as it can require but little if any medical assistance. I have only once seen such a case; and being at a loss what turn it might take, it is imagined, that other practitioners may not be displeased with this account of the probable result.

THIS case was hinted at under the *article* of Hepartomphalos, and the subject of it born in the Lying-in-hospital; where the funis was tied in the ordinary manner, about three inches from the abdomen. But instead of separating close to it as usual, only the part enclosed by  
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*180 Unkindly Separation of the Funis Umbilicalis.*

the ligature decayed; the portion below it preserving its former appearance, except that it was a little shrunk or shortened: some unusual vessel, or vasa vasorum, it is probable, keeping up the life of this caducous part. In this state it remained for some days before the nurse made mention of it to any one; and as it afterwards appeared probable it would gradually shrink away, no particular directions were given; but it was purposed in a few days, to tie the funis close to the belly, if that should not be rendered needless by the cord becoming dry, and dropping off in the usual manner.

When the child was near three weeks old, the funis appeared a little raw and moist, and the ligature was then determined upon; but the mother being called to a place as wet-nurse to a great distance, left the hospital suddenly, the remaining funis being still a living part, but only half an inch in length, and the child very healthy.

**HERNIAE.**

## HERNIÆ.

**R**UPTURES may take place in different parts, but they usually appear at the navel, or the groin. The exomphalos is sometimes complicated with the ventral hernia near the part, and is occasioned by the separation of the recti muscles, the linea alba being there deficient; but it seldom extends far above or below the navel. The simple exomphalos is a very common complaint, which if immediately attended to, is easily cured, perhaps merely by the use of the cold-bath: but if neglected, may prove troublesome as the child grows up; especially to females. It will be sooner cured, however, if treated like the hemorrhage of the navel, by adapting a pyramidical compress, made of round pieces of good sticking-plaster, spread upon thin leather, with pieces of card placed between them; or what is more easily prepared, and is adapted to

K 2

poor

poor people, a piece of bees-wax as broad as a shilling, and half an inch thick : the upper part of it may be round, and the other flat, which should be placed on the navel. But if the child be a twelve-month old, these remedies will then require a pretty tight bandage round the waste ; and such a compression, I have frequently observed nurses afraid of, who often loosen the bandage so much as to render it of very little use. On this account, I have for several years recommended SQUIRE'S elastic bandage, which if this rupture be complicated with the ventral, becomes the more necessary ; and fitting quite hollow on the sides, and making no kind of compression but on the part affected, and the opposite point of the back, perfectly answers the end, and generally in three or four months. But for the simple exomphalos in young children, I have for some years succeeded equally well by the ingenious contrivance of Mr. KELSON of *Seven-Oaks*. This consists only in bringing the parts together

gether by means of three or four strips of adhesive plaster, applied star-wise, across the navel, which are to be renewed as occasion may require.—It has been said, that I have often observed startings of the navel happen to such infants, in whom the skin of the belly has extended further than is common upon the funis; on which account, nurses should be directed to be particularly careful in such instances, and keep the part more than ordinarily confined.

THE bubonocèle is of more consequence, yet may be safely left without a bandage, especially as the cold-bath alone generally cures it when happening to children before they go alone. In early infancy, there is likewise some difficulty in retaining the truss on the part, and it is continually liable to be wetted. If a rupture, however, should be very large, and the infant unusually fretful and crying, recourse may be had to a steel-truss; to which it will be necessary to pay some attention, lest it slip out of its place, or

K 3

the



the rupture fall down, and be bruised by the pad. After two years of age, indeed, when children begin to take more exercise, the use of a truss seems to be absolutely necessary, of which those made of steel as improved by Mr. SQUIRE, are incomparably the best.—Should the cure of either kind of rupture proceed slowly, cold-bathing will assist it, as well as be proper, for some months, after leaving off the bandage or truss.

LASTLY, it may be prudent to drop a word or two on the strangulated hernia; which is more apt to take place in the groin than in any other part, though happily, it is not very common in children. It can be necessary to do little more, than to repeat here the observation made in the chapter on vomiting; that when any part of the intestine is strangulated, the stomach will frequently eject every thing that is put into it, and should therefore, furnish a suspicion of such an accident, and lead to an immediate examination of the parts.

Should

Should the slightest appearances of tumour or heat be discovered, the experienced surgeon will pay a proper attention to it, and can need no directions from this work.—I shall only observe therefore, that the free application of cold water, or of ice, after the ordinary remedies have failed, has in several instances succeeded.

## HYDROCELE.

**T**HIS distention of the scrotum is of a nature similar to the hydrocele of adults, and when it falls to the share of infants, I believe, usually appears at the birth. It has been sometimes mistaken for a common rupture, and a linen bandage been applied in the ordinary manner. It is, however, easily distinguished from that complaint, by the tumour being transparent; without pain; and from not readily retiring upon pressure, nor being increased by the crying of the infant.

K 4

It

It has been thought always to be a congenite complaint, and that the tumour does not retire upon preffure, but I think I have lately seen some instances where it has been otherwise.\* In one I had occasion to examine the parts very attentively at the birth, on account of a little mal-conformation of another kind, and neither then, nor the next morning saw any appearance of hydrocele; nor was it discovered by the nurse or mother till six weeks afterwards, though the parts, for the reason above mentioned, were frequently examined. About this time I was sent for in haste, on account of the appearance of a large hydrocele, which, however, by the mother's report, was before I got there greatly diminished. The scrotum, nevertheless, contained (as I imagine) near a table spoonful of water, and was from this time distended in different degrees, as the water happened to

\* Mr. *Le Febvre de Villebrune* met with it in a child of twenty-two months old.

retire,

retire, more or less, through the tunica vaginalis and rings of the muscles, which I apprehended must have been preternaturally open; though no portion of the mesentery, nor intestine, I believe, ever descended. The complaint, however, disappeared in a few weeks, by only dashing the parts with cold water, three or four times a day.—This infant was a twin; and it is remarkable, that the other child had likewise a hydrocele, which was not discovered for three weeks after the former; but was much smaller, and got well by only the like gentle treatment.

THE hydrocele is a harmless complaint, and would probably always disappear of itself in the course of a few months; but may much sooner be dispersed by some astringent lotion. The aq. ammon. acetatæ has succeeded with me perfectly well, and I have sometimes made use of compresses wetted in vinegar and water, with the addition of a little spirit, as the skin has been able to bear it. Perhaps  
the

the addition of crude Sal ammoniacus, as advised by Mr. KEATE, in the treatment of adults, might assist the absorption of the water; but I have myself never had occasion to make trial of it. The smoke of burning gum benjamin received upon flannel, and applied to the part, is likewise a good remedy. But the speediest method is to puncture the bottom of the tumour with the point of a lancet; which, as it may always be done with perfect safety, and with very little, and only a momentary pain to the child, is often preferred by the mother, as it instantly removes a blemish which cannot but be unpleasant to her, whenever any other person may chance to be witness to it. In whatever way the water be gotten rid of, I never knew it return, nor the child suffer any consequent inconvenience; though the complaint is so common that I have seen it in many score instances, and cured in different ways.

PNEUMA-

## PNEUMATOCELE.

HAVING never seen the complaint, and conceiving that the preceding disorder has often been mistaken for it, I should not have noticed it, but in the view that nothing relating to infantile complaints might be overlooked. Should the scrotum, however, be really distended with wind, a piece of cotton, fumigated with gum mastic may be applied twice a day, and the part embrocated with the compound water of acetated litharge and camphorated spirit, and be supported with a proper bandage.

*RETENTION of the TESTES.*

ONE, or both of the testicles, in some instances, remain in the abdomen of infants

fants at their birth, and then a tumour appears in one, or both groins, forming another affection resembling the hernia, and is noticed on that account. As the application of a steel-truss, or, indeed, any other bandage, might here be attended with bad, if not fatal consequences, it is of importance to avoid the mistake.

This complaint being generally owing to a preternatural stricture of the rings of the abdominal muscles, or to a want of due action in the cremaster or gubernaculum; I have nothing to recommend, unless it be in a negative way, to forbid any rude handling of the part, in order to force the testicles into the scrotum. If any thing of this kind should be judged necessary, from a disposition of the parts to give way, the descent should be only very cautiously assisted, and that not frequently. In the course of a few weeks, or months, however, the obstacle, of whatever kind, usually gives way; though sometimes, indeed, the part remains confined through life, and its unnatural position

## TUMEFACATION *of the* PREPUCE. 141

sion is certainly attended with some inconveniences, and a greater chance of injury to the testes; of which I have seen more than one instance in adults. Should inflammation take place, in consequence of any accident, during infancy, every proper means of counteracting it should be immediately had recourse to, such as gentle laxative medicines, and sedative embrocations and cooling poultices, made of the compound water of acetated litharge.

## TUMEFACATION *of the* PREPUCE.

THIS little complaint, like the hydrocele, arises from extravasated water, and is a partial anasarca, and if it be not attended with inflammation, nor owing to a stone sticking in the passage, as it sometimes is, it never proves of any consequence. It is sometimes preceded by a copious discharge from the part, of a  
thick



## 142 PROLAPSUS, or PROCIDENTIA ANI.

thick but soft consistence, resembling a strong lather of soap, or the froth of milk, which disappears as soon as the tumefaction subsides.

THE part may be washed frequently with the aq. litharg. acetati comp. or be wrapped up in a poultice of that kind, and the body be kept open, which usually removes the complaint in two or three days; but if it should not, the part may be lightly scarified, and afterwards fomented. Should it arise from inflammation, as in the erysipelas infantile, the inflammatory cause must be properly treated. If from a stone in the passage, the stone must be extracted, if within reach, or if otherwise, it should be forced back into the bladder.

## PROLAPSUS, or PROCIDENTIA ANI.

THIS is a descent of the internal coat of the lower bowel, (this coat, it is well known,

known, being much longer than the others, and full of folds); and is either owing to its laxity, or to irritation. It is no uncommon complaint, nor usually difficult of cure, being generally a symptom of some other; such as worms, or other foulness of the bowels, or has been induced by rough purges, diarrhoea, long costiveness, a stone in the bladder, or other irritating cause, and is usually preceded by tenesmus: to each of which the proper remedy must be applied, or the cure of prolapsus will be attempted in vain.

BUT if the complaint should remain, after the irritating cause has been removed, it will then depend merely upon a relaxation of the part, arising from the long habit of descending every time the child has gone to stool; and is, in general, easily cured by an astringent lotion. To this end, a compress of lint, or soft tow, wrung out of the dregs of red wine, to which may be added a few drops of the aq. litharg. acetati should be often applied,

plied, and secured by a linen bandage, so as to make a firm compression on the part; or a compress may be sprinkled with fine powder of myrrh, frankincense, and dragon's blood, or impregnated with the smoke of turpentine cast on burning coals. Or, suppositories may be made of powder of balauftines, red rose leaves, and oak-bark, in honey, and introduced into the bowel, after going to stool.—It may be found expedient to have the part supported at such times, by a servant placing a finger on each side the gut: but this caution will not be necessary unless the complaint has been of long standing, or the descent be considerable.

When this is the case, astringent fomentations and injections will also be expedient. These may be made of a decoction of the cortex querci, which must sometimes be rendered more powerful by the addition of alum, the quantity of which should be increased as the part may be able to bear it.

SHOULD

Should such a case occur in children, as it frequently does in adults, in which the bowel may not be easily returned, on account of supervening tumour and inflammation, the stricture will never fail to yield to an injection of cold water with a few drops of the *aq. lithargyri acetati*, with five or ten of the *tinct. opii*. An hour or two after such an injection has been thrown up, the prolapsed intestine, though perfectly black as well as swollen, will be found to retire of itself; the sedative quality of the injection removing the spasm and stricture, which afforded the only impediment to the re-ascend of the bowel.

CHILDREN affected with this complaint should always sit on a hard, flat-bottomed stool, or a chair without arms, and of such a height that their feet may not touch the ground.—For children of eight or ten years old, who take much exercise, recourse may be had to Mr. GOOCH's suspensory as improved by Mr. SAMPSON, in.

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stead

stead of the linen bandage above recommended.

### DISCHARGES *from the VAGINA.*

**T**HESE are either sanguineous, mucous, or purulent.—As I speak professedly only of appearances before the age of puberty, I have merely to remark on the first, that infants have sometimes such a discharge from the vagina a few days after birth, and, that the like happens to girls of eight or ten years old; but neither appears to be of any consequence. Should, it however, on any account, be thought necessary to prescribe something, a little testaceous powder, or magnesia, according to the state of the bowels, will be sufficient, as the discharge always disappears in a few days.

- CHILDREN of five or six years old, are subject to a mucous gonorrhœa, resembling the genuine fluor albus of adults, which will in some instances be in an excessive

excessive quantity, so as to run through all their clothes; and is sometimes, though rarely, tinged with blood. If it were suffered to continue, it would probably injure the health, but I believe may always be cured, by one or other of the means recommended for the next, which may be called purulent gonorrhœa.

THIS is also no uncommon complaint even in children of two or three years old, and is then, in general, easily removed by a little cooling physic, and keeping the parts perfectly clean. I have sometimes made use of a lotion of the aq. litharg. acet. comp. which I believe is preferable to most others, if had recourse to in the commencement of the complaint; and if there be any excoriations, they should be covered with the unguent. cerussæ acetatæ, spread upon linen, or lint. Instances will now and then occur in this species also, in which the quantity of discharge will be exceedingly great, so as to run down the child's limbs, several times in the day; and will last for two or three

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weeks :

weeks: but it has always disappeared in that time, and not uncommonly, where it has been the most copious, ceases almost suddenly.

WHEN the purulent discharge makes its appearance much later, as it not unfrequently does, and is much discoloured, and fetid, it gives rise to a suspicion which young practitioners cannot be too guarded against. There are, indeed, instances of little girls, not more than six years old, being injured; and it is of consequence to make a judicious discrimination: but there are on the other hand, instances of a very suspicious appearance, as late as the age of thirteen or fourteen, where no injury could be received without the consent of the party, who is generally perfectly innocent, and where, therefore, the least suspicion would be very distressing to her, and might make a whole family miserable.\*

Dis-

\* Induced by motives of humanity, I hope I may be permitted to add a word or two more on this subject, since

DISCHARGES with the worst appearances are frequently carried off in eight or ten days, merely by the treatment above recommended; but I have seen some cases in the youngest subjects, of a bad habit of body, where mercury, as a deobstruent, has proved useful, though I could not have the least suspicion of a venereal taint. In such cases, I have found WARD'S white

since the prudence and information of practitioners may not only prevent a vast deal of unnecessary distress to many worthy families, but may even save the character, or life of another party suspected of criminality. For, besides many instances wherein inattention or ignorance might give rise to injurious suspicions, there are cases which call both for great attention and experience, in order to form a just and decided opinion. I have, indeed, known the discharge to be so ill-coloured and fetid, and attended not only with great pain and inflammation, and excoriation in different parts, but such tumour and other appearances of violence offered, about the furca, and in other instances, with an abscess in the labia; that had the patient herself advanced any charge, I fear, I should not have hesitated to have joined in with it; and yet from the event, as well as the whole history of several cases, it has been very evident, that no kind of injury had been received.

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drop



drop a more convenient medicine than any other preparation of mercury; it may be given in the dose of half a drop, and by degrees, be increased to two and even three drops, once or twice a day, for two or three weeks. But where this has failed, I have only to add, that I have been always able to succeed by giving the decoctum corticis, cum balsam. copaibæ, ovi vitel. solutum; which is also an admirable medicine in the fluor albus of adults.

*On the VENOM of INSECTS, and of CERTAIN  
ANIMALS.*

**T**HOUGH the following accidents, like some others before mentioned, are not confined to any age, they are, at least, more formidable when they fall to the lot of little children. On this account, it may not be improper to recommend suitable antidotes against the bite, or sting of  
venomous

venomous insects, particularly the wasp, gnat, and other flies. Indeed, for the most venomous, such help can rarely be had before considerable inflammation has taken place; after which it will take its course, and will continue, if occasioned by a gnat, three days, and by some other insects, for six; though the tormenting itching may be allayed much sooner by the means of proper applications. If the bite should be on the eye-lid, the inside of the lip, or ear, very troublesome symptoms may follow, and the infant will be vexed by it exceedingly.

In the absence of better remedies, the first application may be, of the strongest spirit at hand, three parts, two of vinegar, and one of sweet-oil; taking care it do not get into the eyes. But as soon as may be, the following should be applied very frequently, which will check the progress of the venom, and allay the pain and itching immediately.

L 4                      R. Spir.

R. Spir. camphorati, ʒiʒ.

Aceti distil.

Tinct. opii ʒa ʒj

Misceantur,

to which, if the injury be not too near the mouth, may be added twenty drops of the water of acetous whey.

The bite of the common bug which infects crowded places, not only occasions a tormenting itching in children of a very delicate skin, and in certain grown people newly come from open villages, but will also sometimes raise blisters as large as pigeons eggs, and will beset the parts for several days. A very good application is vinegar with a small quantity of olive oil, and a few drops of laudanum: oil alone would rather increase the size of the blisters. But the best application, I believe, for the sting of any of the above mentioned insects where the inflammation extends far, is ice, which immediately takes off the heat and itching; and should be repeated for half an hour at a time, every

every three or four hours, as long as may be necessary.

The sting of some insects has sometimes been found to penetrate one, or more of the absorbent vessels, and has then produced an appearance that would have been very alarming if such insects could convey a truly morbid poison. I have seen large branches of lymphatics, very tuffed and inflamed, running from the knuckles to the axilla, producing an almost intolerable itching and burning, until the last mentioned remedy has been applied; which has presently abated these troublesome symptoms, and carried off the hardness and inflammation by the next day.—For the highly venomous bite of the viper, the immediate application of olive-oil is the well-known, and certain remedy; as well as the internal exhibition of the volatile alkali.

UNDER the painful impressions of an awful accident that happened in my own family, some years ago, at the time I was engaged in this part of the work, (though,  
I thank

I thank God, the alarm terminated happily), I cannot avoid dropping a few words on the envenomed bite of *morbidly ENRAGED ANIMALS*.\* It is not my intention, however, to advert to the peculiar nature of this most malignant poison, nor to enumerate the many deceitful remedies that have been at different times proposed with an air of infallibility, whose inefficacy is well known.† Nor is it my design to propose any new remedy, but rather to lament, that the best preventives should be so ill attended to, particularly amongst the inferior class of people; to whom this dreadful accident happens oftener than to the rich. And on this account, as well as the subject being rarely

\* The disease among *Dogs*, has been known, it is said, about 2050 years.

† In regard to dipping, or rather, half-drowning in the sea, I shall just remark, that I should have more hope of its efficacy upon the first approaches of the hydrophobia, than as a preventive very soon after the bite.

...  
treated

treated of, it is hoped, the intention will apologize for obtruding a friendly caution in this place. For, after a good deal of experience, and much inquiry and reading on this subject, I am confident, that nothing ought, in any instance, to be depended upon, but taking out the injured parts, by the knife or caustic, or both; which if duly and timely effected, cannot fail to prevent every evil apprehended.\* But whenever the situation of the wound may not admit of going deep enough to insure success, or too much time may already have elapsed, the stronger mercurial ointment ought to be rubbed in very freely, so as to raise a salivation; which has not only been thought, to have

\* Since former editions of this work, this opinion is further confirmed by the cases of Mr. JESSE FOOT, published in Dr. SIMMONS's Medical Facts and Observations; in which we see the different success attending excision of the parts, and various other highly extolled remedies, even in subjects bitten by the same animal. A remarkable case is also given in the 4th vol. of the Memoirs of the Medical Society of London, by Dr. JAMES SIMS.

proved

proved an effectual prophylactic, but to have also succeeded even where evident symptoms of infection had taken place: \* though such testimony, I am sorry to add, is much weakened by many later experiments.

For the sake of such readers as may not have opportunity for reading many different publications, it may not be superfluous to subjoin the judicious directions of the faculty in *Paris*, submitted to the Committee of public instruction, which will bring the whole of the indications into view.

Let the wound and the surrounding parts be well washed with lukewarm water, to take off the slaver as much as possible.

Let the wounded flesh be then instantly cut out with a sharp instrument, or cauterised with hot iron, or with spirit of nitre,

\* See *Histoire et Mémoires de la Société royale de Médecine. Année 1783. 2de partie.*—TISSOT. DR. LAYARD, &c.

or

or vitriol, commonly known by the name of aqua fortis, and oil of vitriol.\*

Suppuration will be accelerated, and pain alleviated, by filling and covering the wound with a poultice of bread and milk applied lukewarm, and renewed every four hours.

Let the surrounding parts be then rubbed with strong mercurial ointment. If the danger be imminent, and the bites deep, or numerous, salivation should be excited as soon as possible. It is also necessary in this extremity, to cut away, burn, or cauterize the flesh around the wound, even although it should appear

\* Dr. Hamilton's experience confirms the efficacy of excision in numerous instances, when done even as late as the fifth and sixth day after the bite; and in some instances after re-inflammation of the bitten parts, and commencement of the symptoms. He also prefers an excision of the parts, as more certain, than the caustic, unless the kali purum is made use of, which forming an immediate eschar to some depth, the eschar may be removed by a spatula, and the caustic be repeated immediately, as often as may be judged necessary.

to



to be healed up. It is certain, that the wound opens, when the hydrophobia makes its appearance.

In a work calculated, for as extensive usefulness as the writer's resources may supply, it can scarcely be judged improper to add to all that I have said, the pertinent observations found in Dr. HAMILTON's last edition on this melancholy disorder, as guards, or preventives of injury.

THE following symptoms, he tells us, may be noticed in dogs about to become rabid :

1st. A disinclination to food.

2d. A marked melancholy.

3d. The eyes appearing mixed and dull.

These symptoms, he says, mark the first stage; yet with scarcely any thing pathognomonic. But, it is added, that the animal now occasionally forgets his master, and is irregularly peevish; and it becomes at this time highly proper to regard our safety, and not to trust him if he snarls, nor to caress him.

The

The second stage is more distinctly marked; the dog does not feed with avidity, though he does not refuse either his victuals, or drink; the latter in no stage offending him as it does man under this disease. But he shuns other dogs, and is equally shunned by them. A convexity may likewise be discovered in his back, formed by drawing his hinder towards his forelegs; and an extreme dryness of his nose.

In the last stage he loses all recollection, quits his master's house, runs forward anywhere, and rushes, without barking, at every animal coming in his way; but turns not aside to bite any; and within the space of two days after dies convulsed. If he be tied up, he bites at his chain in this stage, and is furious if approached.

I HAVE only to add, (what it is, indeed, a great satisfaction to be able to say,) that, dreadful as this accident is where the poison has taken effect, it is evident, that only a very small proportion of those who are bitten by animals actually enraged,

raged; becomes really infected.\* Fortunately, the clothes sometimes prove a defence, by wiping off the foam from the animals teeth; at others, it does not happen to be forced into the wound, or is not yet possessed of a poisonous quality; or lastly, it is not absorbed, or the system may not be in a state to be infected. These assertions are supported by numberless facts, though much less frequent, perhaps, in *London* than in some other parts, especially in the vicinity of large forests on the Continent, where such animals are very commonly met with, and often wound great numbers of people.

It is, doubtless, the uncertainty of the bad consequences of such injuries, that has supported the credit of many fallacious remedies on this melancholy occasion. Encouraging, therefore, as the above circumstances certainly are, it would, indeed, be madness to confide in them, where the proper remedy may be made

\* *Dr. Hamilton* says, not one in sixteen.

use of in time ; and though I should wish to conceal rather than spread these acknowledged facts, could I think they would have such an effect,\* it is on the other hand, no small satisfaction, that such encouragement may be justly held out to those who may be under any alarm for themselves or their friends.

## DISORDERS

*Recorded under obsolete Terms by*

ANCIENT WRITERS.

**I** SHOULD here close the account of Diseases, did I not meet with several others recorded by the ancients, which it may therefore be proper to take some notice of. They appear in the works of *Rhazes*, *Paulus*, *Ætius*, *Fabricius ab Aquapendente*, *Celsus*, *Primeroſe*, and a few less ancient

\* Indeed, a late, and well-known, melancholy instance of *rabies canina*, in a medical gentleman, and the uncertainty of the more ordinary means, might sufficiently caution every one from neglecting any suspicious case, or trusting to inadequate remedies.

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writers.

writers. Of some of the diseases there mentioned, I know nothing but from the authors own account of them, or that they are needless distinctions of diseases (already sufficiently noticed) which the ancients were very fond of making, especially in complaints of the skin; but can answer no practical end; of the others a more particular account will be given. Among the diseases recorded by these writers are, *Lentes*, *Hispiditas*, *Achores*, *Favus*, *Psorophthalmia*, *Impetigo*, *Ranule* or *Batrachos*, *Seriasis*, *Paxisthemia*, *Parulis*, *Inflatio*, *Grinones*, *Malum Pilare*, *Phthiriasis*, *Hydroa*, *Macies*.

The first six are affections of the skin, or of the eye-lids. *Achores* and *Favus* are a sort of *Crusta-lactea*, so called by some, when of a dark colour, or ulcerated, and extending to the head, and *Impetigo* when it attacks the chin; but by others the term *Achores* is applied only to adults. The Scald-head also, denominated *Tinea* when the scabs have resembled moth-holes in cloth, and *Favus* when like a honey-comb, has been by some termed *Achores*,  
when

when the discharge has been unusually acrimonious. *Pterophthalmia* is confined to the eye-lids, and is so named by CERIUS, and others after him.

RANULA is said to be an inflammatory tumour of the parts under the tongue, and according to the ancients, particularly of the veins: it sometimes ulcerates, but often presents a species of soft and lax oedema. CELSUS says the tumour is sometimes inclosed in a cyst, which must be taken out; the operation for which is fully described by AQUAPENDENTE. Although such seemingly different accounts are given of this complaint, the *Ranula* appears to be no more than an infarction of the sublingual glands, and I believe, is not very common either in infants, or adults; and indeed is mostly an endemic complaint. I have seen it, however, in this country, in both; and at this time am attending an infant in whom it rose very suddenly, and after increasing greatly for two months, and continuing very hard, is at this moment becoming soft

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and

and loose, and is considerably diminished in its size. I have seen it in an adult bigger than the largest walnut, and was then very troublesome, both in speaking and deglutition. When of such a size, it is usually soft, and contains a fluid, and sometimes calcareous concretions, owing to an obstruction of the salivary ducts. In this case, it needs only to be opened, and to be cleared of all the concretions; but if it be hard, the whole tumour must be extirpated. TULPIUS relates a case in which the matter adhered so firmly, that the surgeon, after having laid open the cyst, was obliged to have recourse to the actual cautery to destroy the inspissated juice. *Seriasis*, from σίσις, quia caput quasi excavatum cernitur; the bones about the fontanelle, or sometimes the membrane only, being depressed, or drawn in. PAULUS (*Lib. i.*) describes it as an inflammation about the cerebrum, in which the brain is said often-times to mortify within three days; but if it should not, the child, it is said, will

will recover.\* I have never met with any thing like this disorder accompanied with a depression of the skull, though I have seen the precise depression unaccompanied with any disease, and something very like the disease without the depression. The latter was noticed in an infant of five weeks old, who died of convulsion fits, the brain appearing as if in a state of mortification, and smelling exceedingly fetid. *Paristhmia* is an inflammation of the tonsils, or throat, but is certainly not common in this country; it is hinted by HIPPOCRATES in his book *de Dentitione*. *Parulis* is a complaint described by PAULUS as a painful tumour about the gums; RHazes calls it a blister in the mouth. *Inflatio* is a distention of the skin from wind or water after a child has been reduced by long illness. *Crinones*, or *Grubs*, is little known as a disease, I believe, in

\* Perhaps *Hippocrates* may allude to this disease, *Aph.* 50. sect. 7. "Quibus cerebrum fideratum est, intra tres dies interijunt, si vero hos superaverint, sani sunt."



*Europe.* It is a secretion from the sebaceous glands, and appears on the arms, legs, and back, of sucking children; and is absurdly enough thought by some to be produced by insects: \* older children are often found to have some appearances of it, but it seldom affords them further trouble than a little itching, and they amuse themselves by forcing out of the skin what they call worms.—In the instance of infants so affected, rubbing the parts with a coarse cloth, by the fire-side, is all that will usually be necessary in northern climates.

THOUGH this kind of affection is generally of little consequence, whether in infants, or young children, I have nevertheless, sometimes known it prove a very troublesome complaint in older subjects, especially in females about the time of puberty. In such instances, the whole neck, back, and breast, will be covered with little black spots, which gradually

\* ASTRUC. LIEUTARD. PEACHY.

inflammation till the parts become totally covered with heated pimples. These at first itch intolerably; so as frequently to keep the patient from sleep through the greater part of the night; and in consequence of being continually rubbed, turn to little inflamed and angry boils. When some of these have discharged the sebaceous matter, and are healed up, others will arise, in succession; and at the end of several months, the superior parts of the body are covered with them.

After making trial of common purges and alteratives, to no lasting advantage, I have cured the complaint by washing the parts morning and evening, for a few days, with the *lotio saponacea*, and afterwards rubbing in a little *unguentum hydragryri nitrati*; and when the soreness has gone off, making use of a proper flesh-brush, for two or three months. The patient may at the same time take fifteen or twenty drops of the *aqua kali pp'*. two or three times a day, in a cup of *sassafras-tea*, or milk and water.

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## 168 MORBUM PILARE—PHTHIRIASIS.

A COMPLAINT sometimes confounded with the former, is that called *Morbum pilare*, and is supposed to be spoken of by HILDANUS as sadly tormenting one of his own children. It is also mentioned by PAREY; but I have never met with it myself. It is said to be owing to hairs not duly expelled, which stick in the skin, especially in the back of young infants, whom it torments by an incessant itching, and sometimes raises small tumours. The cure is said to consist in fomenting the parts, and then pulling out the hairs with a pair of nippers.

*Phtiriasis*, or *Morbus pediculofus* is a complaint I should not have mentioned, were it not sometimes found very troublesome, and the heads even of children who are kept the most cleanly, much pestered with these ugly vermin. It is not therefore intended to treat of it as a disease in other parts, (which are sometimes equally occupied by them) and will be quite sufficient to say, that the cure is, in general, very simple, and requires only  
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the hair to be sprinkled for a few days with the powder of staves-acre; a remedy that is kept a secret by some foreign perfumers, who sell it at a great price. Should this be ineffectual, a very small quantity of the calx hydrargyri alba may be joined with it. Some people have strongly recommended an ointment made of parsley-seeds boiled in fresh butter, which is to be well rubbed into the hair for three or four days.

*Hydroa*, or *Sudamina*, is a trifling eruption from the sudorific glands. *Macies*, or according to some, *atrophia lactentium*, is applied to a decay, said to arise either from worms, (and is then called *atrophia verminosa*)\* or to the unsuitableness of the breast-milk, which though it may be good in its kind, will not prove alike nourishing to all children. The milk is then properly directed to be changed, upon which it is remarked, the child will often recover, as I shall have

\* See HARRIS.

occasion to notice those at large; in the third volume, on the *management of children*. This disorder is, however, a true atrophy, or marasmus, from whatever cause; and into which an infant may fall in consequence of almost any of the complaints treated of in the foregoing pages when they may happen to prove of very long continuance.

I HAVE now gone through all that have been usually ranked amongst the disorders of infants, and have taken sufficient notice, as I apprehend, of every complaint worth mentioning, that I have met with either in my reading or practice; and may flatter myself this tract will be found to possess the advantage of completeness above every work of the kind. That nothing may be over-looked, it remains to take notice of some *congenite disorders*, and external blemishes; and first of those about the Head.

ENCE-

ENCEPHALOCELE, or HERNIA of the BRAIN.

**M**ANY infants come into the world with various parts imperfectly formed, especially about the head; and never more commonly than in the upper part of the skull. If the deficiency be very great, and accompanied with a like want of brain, such fetuses fall under the class of Monsters, and being never born alive, are not subjects of this work.

THE Hernia of the brain, on the other hand, is met with in infants otherwise completely formed, and is generally curable. The public is indebted to *Mons. Ferrand* for an accurate description of this complaint, given in the 5th volume of the *Memoires de L'Académie royale de Chirurgie*.

THE Encephalocèle is a soft circumscribed tumour, usually of a round form, and correspondent in size with the extent of  
the

the deficiency of cranium ; to which the complaint is owing. It is without fluctuation, or discolouration of the skin, but is attended with a perceptible pulsation of the brain, which synchronizes with the pulse. The tumour retires and disappears upon pressure, and is always situate either on one of the fontanelles, or in the course of one of the futures, and is never larger than a pullet's egg. Where the defect in ossification is very considerable, a much larger portion of brain is consequently protruded, which strictly speaking, it were less proper to call a disease, than a fatal mal-formation, as it is pertinently remarked by *Monf. Ferrand*, and no more resembles the true encephalocèle, than an eventration resembles the common intestinal hernia. It will be very necessary, however, carefully to distinguish this incurable evil from other soft tumours of the scalp, presently to be noted, which it very much resembles ; the latter having frequently the like precise feel of a bony margin around them,

as

as is common, indeed, in cases of extravasation upon any solid surface. The tumour is also colourless, and often as large as in the fatal mal-formation, but has a considerable fluctuation, and is further distinguishable by the tumour not retiring upon pressure, nor being attended with any pulsation.

THE Encephalocele is, indeed, easily distinguished from them both, by the brief description above given of it; and fatal as it would be were it left to itself, requires only to be properly understood, in order to adapt a rational and effectual remedy, which consists only in a careful and due compression of the part. This may be effected by the application of a piece of sheet-lead, somewhat larger than the tumour, and pierced with holes, that it may be sewed to the child's cap. The compression should at first be very moderate, and never so great as to give the infant pain, nor disturb any of the natural functions; though it should be gradually increased as the tumour shall retire.

This



This is all that is required from art, the cure being the business of nature, which if the child continue healthy, will proceed in the work of ossification, and in due time fill up the vacancy in the skull. The protrusion of the brain was before an obstacle to this process; whilst the injury that tender organ must sustain by the pressure from the sides of the bone, exposed it to all the evils which compression never fails to produce, and which it were needless to enumerate in this place.

#### TUMOURS of the SCALP.

THERE are other tumours on the head of new-born infants, which it were improper entirely to pass over. The one I shall first mention is of the least importance of any, being occasioned merely by long compression in the birth. It is of different sizes, and the skin is always discoloured; but in any case can seldom require

quire much attention, as it frequently disappears in a few hours. If large, it is common to bathe, or foment such tumours with red wine, or with brandy, or vinegar, diluted with water; and in general they gradually subside, though sometimes not perfectly for several days. Some of them, however, are of more consequence, and concerning the treatment of which practitioners have differed; the absolute impropriety of opening any tumours arising from compression having been conceived of by many. On the other hand, I believe, it may in some cases be really necessary, in order to prevent a troublesome fungous sore, and even a caries of the skull. The discrimination, however, is sufficiently obvious, such assistance being required only where the above remedies and compression have had no effect, and the tumour is found sensibly to increase day after day, which in some instances has been the case to the end of the month. Such growth is always owing to the extremities of the arteries ruptured by long compression, being

ing still open, and pouring out an ichorous fluid into the cellular membrane, and thereby keeping up, and increasing the original tumour.

UPON opening the integuments, a bloody fluid is let out, and the tumour nearly subsides, which afterwards requires nothing but moderately astringent applications and pressure, which should be continued for a little time after the aperture is closed.

ANOTHER kind of tumour, of a more unfavourable appearance, was hinted at under the article of Encephalocoele, and of which it may be proper in this place to take a little further notice. These tumours contain a kind of serum, and are often very large, but without that discolouration of the scalp and bruised appearance, which there constantly is in those last described, nor do they, indeed, seem to arise from compression; I have, at least, seen them extending over a third part of the head, and raised an inch or more from the skull, after the shortest and most easy labours. To the description  
before

before given of them it may be added, that this kind of tumour, I believe, will always subside very kindly, though sometimes not completely, until the end of the month. In some instances, it begins to lessen in six or eight days after birth, but in others, not till near the end of the third week, and, then subsides very rapidly; and as it falls, more and more of the skull may be felt, from day to day, in proportion as the absorption of the fluid takes place. To assist nature, therefore, in this operation, embrocations of acetum distil. sal ammon. crud. and spirit camphoratus, should be made use of, with a gentle compression of the part; as well as keeping the bowels properly open.

LYMPHATIC TUMOURS *on the* HEAD *and*  
SPINE.

THERE is another kind of tumour appearing sometimes on the head, and at others, on some part of the spine, which,

is not owing to accidents in the birth, but is, of a morbid nature. These tumours contain a lymph, and are attended with evident fluctuation, as may be discerned by the touch; and unless they are exceedingly small, ought in no case, I believe, to be punctured, or even removed by ligature, though adhering only by a small pedicle. Those on the spine of the neck, or back, or on the loins, if they do not arise from the dura mater inclosing the medulla spinalis, seem to originate at least from the periosteum of the spine; and the issue having a morbid source, will be kept up after the tumours are opened, or even totally extirpated, and preventing the sore from healing, the infant sinks under the discharge, or dies in convulsions.

But there are other tumours of a similar appearance, which being, nevertheless, of a different kind, may be sometimes safely extirpated, and will be noticed below after the Spina Bifida, to which likewise they bear a considerable resemblance.

IMPERFECT

IMPERFECT CLOSURE of the FORAMEN  
OVALE, and CANALIS ARTERIOSUS;  
with other PRÆTERNATURAL CONFOR-  
MATIONS of the HEART.

**T**HE subjects of these affections have been termed *pueres cæruleati*; but the affection itself might more properly lead to a name, and be termed *cutis cæruleata*; though neither would describe at all the nature of the disorder.

Dr. SANDEFORT, Mr. ABERNETHY, and more lately Dr. NEVIN of *Glasgow*, have given instances of it, which accord with those before offered to the public, by other writers.

These morbid deviations appearing in different parts,\* have in all the same tendency, viz. in a greater or less degree,

\* See *Mortgagni, Epis. 17. Art. 12. Lond. Med. Journal, page 4. and Med. Observ. & Inq. vol. vi.*

## 180 IMPERFECT CLOSURE *of the* FORAMEN

to obstruct the passage of the blood through the lungs, which in some instances has continued nearly the same as in the unborn-fetus. The peculiarity, is sometimes in the pulmonary artery, which is constricted, or closed, as it rises from the right ventricle; at others, in the septum cordis, which has an unnatural opening, affording a free communication between the two ventricles; sometimes in the aorta arising equally from the anterior and posterior ventricles; and sometimes in the imperfect closure of the foramen ovale, or the canalis arteriosus.

These sources of disease are mentioned merely with a view of pointing out the symptoms by which they may be known, and not of attempting a remedy; which is out of our power. The recital, however, may serve to prevent fruitless attempts, and perhaps the aggravation of the symptoms, and consequent distress of the patient, where upon due knowledge of the disease, art has, evidently, nothing to offer. The imperfections are owing entirely  
c; to

to an original mal-formation of parts, or to a deficiency in the powers of the system soon after birth; the only time in which that diversion to the circulation can take place, which nature has intended upon the change made in consequence of respiration.

THE precise time when this new mode of circulation should take place, is not attempted to be settled, the passage between the auricles, and that between the two great arteries, being open in children of very different ages; nor do both always close at the same time. It is conjectured, however, that this process ought to begin from the birth, as it is found to do in the remains of the vessels of the funis umbilicalis;\* so that, although the fetal apertures in the heart should not be actually impervious at the end of some

\* It is probable, however, that they are not very firmly closed for some time, as I have easily forced the vessels open, by an injection, in children who have died at the end of the month.



## 182 IMPERFECT CLOSURE *of the* FORAMEN

months, it is imagined that some constriction has usually taken place, and that, at least, some check is given to the blood's passing from one side of the heart to the other, in the free manner it does in the fetus. This, it is natural enough to conceive, and I apprehend, is owing to a greater quantity of blood rushing into the lungs, in consequence of respiration, (which lessens the difficulty of entering that organ;) by which means, a greater quantity flows into the left auricle from the pulmonary veins, which filling the part, prohibits an entry from the right. Upon the like principle, the aorta being more distended by a large quantity of blood from the left ventricle, does not allow the pulmonary artery to empty itself into it by the canalis arteriosus.

Sometimes one of these apertures is found open, and the other closed up, especially the canalis arteriosus, which is of the greater consequence; the foramen ovale having in several instances been found pervious in adults; and it is imagined

gined is always so, in those divdms who can remain the better part of an hour under water.

WHETHER the preternatural aperture be in the vessels, auricles, or ventricles; or wheresoever any morbid stricture may be, whenever it may prove of any consequence, the constant symptoms attending it are a discolouration of the face and neck, with a sloe-blue, or leaden-colour of the lips, such as is met with in some fits of asthma; and sometimes an unnatural coldness of the body. The discolouration almost always takes place very soon after birth, and is increased, and attended with difficulty of breathing, as often as the child is any wise agitated; and whereby he is disposed to throw himself in a horizontal posture. These symptoms are not at all relieved by procuring stools, by the warm-bath, or any other mean made use of as a remedy for fits; nor can be, but by the child being kept as tranquil as possible.

If the aperture be in the canalis arteriosus, children usually sink very soon under the complaint, (although this is not always the case,) of which I have seen one instance a short time ago; and for want, it is imagined, of a due portion of oxygen gas, owing to the full proportion of blood not passing through the lungs. But if the aperture be in the inferior parts of the heart, infants more commonly survive for months, or even for years; although some physiologists have conceived there may be the like disproportion of oxygenated blood. A recent instance of such prolonged life, with an accurate account of the disease, is recorded in the third vol. of the *Medical Transactions* of the College. In such instances, the system having been accustomed to the effects of this derangement, is better able to withstand them; the patient, however, can endure but little motion, the heart becoming thereby surcharged with blood, and respiration rendered

dered more difficult; hence also the blood is detained in the extremities, and the face, neck, and hands become particularly discoloured. Some time, indeed, before the patient sinks under the disease, the symptoms are aggravated, and almost the least motion endangers suffocation.

### SPINA BYFIDA, or HYDRO-RACHITIS.

**T**HIS morbid affection is more commonly known here by the former of these terms, though the latter is thought by many to be the more proper name; the first being taken only from an effect, the other being descriptive of what is deemed the original disease. It is also known by other names, as writers have been severally impressed by the cause, effects, or the appearance of the disease. RUYSCH therefore calls it a dropsy, and BERTRANDI,\* a hernia of the medulla spinalis; the

\* *Opere di Ambrogio Bertrandi. Tomo ij. Torino 1786.*

medullary

medullary structure being in some instances destroyed, and a spongy substance filling up the cavity of the membrane, and protruding through the byfid spine.

It is remarkable, that this complaint, or malformation, though now every where to be met with, was not described, as I believe, before TULPIUS wrote,\* whose observations and cases were first published in the year 1641, and afterwards with some additions, as late as 1716, which is the edition I have seen, and contains an accurate account of the spina byfida.

Since the above period, the disorder has been regularly noticed by various writers; but not being a very common one, and very little having ever been attempted or proposed for its relief, I judged it sufficient in the earlier editions of this work, barely to notice and describe the complaint, in order to guard against its being mistaken, and an infant's life shortened, by rashly opening the tumour. But as

\* *Tulpii Observationes Medicinæ.*

various

various solitary cases and observations are diffused through different medical works, and none of the late writers having methodically collected and arranged them, nor any since MORTGAGNI paid much attention to the subject; I have now been induced to take it up more at large. Having also myself seen the disease about eight or ten times, (under which one child languished seven weeks, and another several months,) as well as conversed with many practitioners who have as often met with it; I have thought, that in a work devoted to the diseases of children, it might be agreeable, if not instructive to the reader, to see all that is of importance on the subject brought into one view.

With this intention, I shall briefly advert to the writers we are obliged to for any account of this congenite derangement; and after considering its nature, cause, and the periods at which it proves fatal, shall state whatever has been proposed, or attempted in a way of palliation, or cure.

It

It is remarkable, that in a disease for which so little can be done, both the earliest and latest writers have agreed so well in their opinion, and description of it; though some, indeed, do little more than mention it, notwithstanding they all appear to have seen the disease. It hath been observed, that it does not seem to have been noticed by any of the ancient writers; and TULPIUS himself appears to speak of it as of one he had not long been anywise acquainted with; we accordingly find him saying but little on its precise nature, or cause. Soon after him wrote C. STALPART VANDER WIEL, and MUYS<sup>1</sup>, the one in the year 1682, the other in 1695, and about the same time BONETUS<sup>2</sup>; but these throw very little light on the subject. RUYSCH treats more largely upon it, and it has been noticed, calls it a dropsy of the spinal marrow, as the hydrocephalus is of the head, or brain, and

<sup>1</sup> *Praxis Medico-Chirurgica rationalis.*

<sup>2</sup> *Schulch.*

with

with some propriety, as will presently appear. BIDLOO<sup>3</sup>, physician to King WILLIAM the third, and SALZMANNUS<sup>4</sup>, his cotemporary, have noticed the disease. RUTTY<sup>5</sup> gives a good anatomical account of it. TITSINGH wrote upon it in 1733<sup>6</sup>. ZECHAR. PLATNER<sup>7</sup> more fully in 1745, and ACRELL<sup>8</sup> in 1748. VAN SWIETEN and MORTGAGNI wrote, it is well known, nearly at the same time; the former of whom copies TULPIUS and RUYSCH, but the latter quotes various other writers, and takes as much pains to investigate this disease as almost any other that he has recorded. Our countryman Mr. WARNER,\* was well acquainted with it, and relates an instance of a man, living to twenty years of age, though the disorder had in-

<sup>3</sup> *Bidloo Opera Exercit.* 7<sup>m</sup>.

<sup>4</sup> *Dissertatio de quibusdam tumoribus tunicatis externis.*

<sup>5</sup> *Philosoph. Trans. Abr.* vol. vij. inter annos 1779, 1783.

<sup>6</sup> *De Spina Byfida.*

<sup>7</sup> *Platneri Institut. Chirurgicæ.*

<sup>8</sup> *Memoirs of the Royal Academy of Sciences, at Stockholm.*

\* *Surgical Cases*, 1750.

duced



duced a palsy of the lower extremities; but not so bad as to disable him from walking. Dr. MONRO, in his treatise on the dropsy, in 1756, merely names the disease; but Mr. WHITE describes it well, in his surgical cases, written in the same year. BLANCHARD also mentions it; likewise *Monsieur LE CAT* † in 1765, GOOCH in his Surgery in 1771, AMBROSE BERTRANDI ‡ in 1786, and LOUTH § as late as 1788.

By the accounts given by these writers, it appears, that this disease fixes either upon the superiour parts of the spine, and is then seated upon the last vertebra of the neck, and the first of the back; or else is lower down on the last of the loins, or more commonly, on the os sacrum, and is usually upon the centre, and posteriour part of these false vertebræ: but WEP-

† *Dissertation sur la Sensibilité de la dure mere, &c.*

‡ *Opere di Ambrogio Bertrandi Tomo ij, Torino.*

§ *Nosologia Chirurgica.*

WER \* saw one on the right side of the loins.

The skin is sometimes entire, and sometimes ruptured externally, at the birth; and in the latter case, I believe, the infant is always still-born, at least, it has been so in all the instances that I have met with; though such fetuses are often full-grown. In this case, the edges are prominent, and the centre is, of course, depressed, the ulcer very much resembling the form of the human mouth when the angles of the lips are drawn together, and the middle part is pushed forward.

When the skin is entire, the disease appears in the form of a tumour, varying in size from that of a pea, or even smaller, to that of an half-crown piece; being also more or less elevated. The highest point is usually very thin, and sometimes transparent, from having no true skin; other parts of the tumour are red or livid, having very much the appearance of some

\* *Wepferi Observationes.*

cancerous

cancerous tumours upon the point of ulceration. The surface is generally very soft to the touch, especially in the centre, from which a fluid retires upon pressure, and round the margin of the swelling the bony edges of the spine may be distinctly felt; a circumstance that ought always to be attended to, as leading to a certain diagnostic. In other cases, no fluctuation is perceptible, but a carneous substance, hard and thick; and such infants cannot endure being laid on the back, but presently become convulsed. MUYSH mentions an instance of the disease being situated between the scapulæ, in which the skin was not at all discoloured; the deficiency of bone was therefore, probably, very small, as likewise seems to have been the case from the event, as will be mentioned in its place.

The internal appearances are various: suffice it to say, that as the disease takes place during the process of ossification, the internal derangement seems to depend very much upon the period at which the complaint

complaint may commence. In general, there is a confusion of nerves, blood-vessels, membranes and ligaments, together either with a hard flesh-like substance, or a certain portion of discoloured lymph. This is, probably, small at first; but the necessary support of bone being wanting, the lymphatics of the membrane investing the spinal marrow, it has been supposed, continually deposit their contents; enlarging the tumour, and increasing the disease. I saw one instance in a fetus of about five months growth, where the bone (the os sacrum, as yet, indeed, in a cartilaginous state) was complete on the outside, but deficient within; the spinal marrow was also wanting, and there was a considerable quantity of water.

MANY children born with this complaint do not seem to have suffered by it while in utero, being healthy, often large, and very strong; but some are otherwise mutilated; it being not uncommon to find one or both the ankles distorted, or to have the lower extremities weak, and

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sometimes totally paralytic : and there is in others a great deficiency of bone on the upper part of the cranium. The higher up the seat of the spina byfida may be, the greater is usually the injury, and the sooner the infant perishes, unless the aperture of the bone be very small, as is sometimes the case.

FROM what has been said, as well as from a similar disease being occasioned by internal injuries of the spine, as mentioned by LE CAT,\* it will appear, that the disease, as hinted above, may be owing to some interruption to the process of ossification, and a consequent distension of the membrane investing the spinal marrow from the pressure of the fluid, which in return becomes a further impediment to that process. It is not improbable however, that this undue secretion of lymph may be oftener the original source of the disease ; the water as an unnatural

\* *Traité de Mouvement musculaire ; de la Sensibilité, de l'Irritabilité, &c.* 1765.

compression, either preventing the formation, or afterwards destroying a portion, of the bony arch intended by nature as a protection to the tender marrow; a part essential to the animal functions. Hence, LAUTH has very properly defined the disease to be, *Aqua in Specu Vertebrarum collecta in Infante, Vertebrae ultimas Columnae Pondere suo findens, et Tumorem prope Os Sacrum constituens*: though it does not, as it has been said, appear always in this part.

It is sometimes a mere local disease, confined within the circumference of the tumour, and at others, the water rises a little higher in the vertebral column; and hence RUYSCH has considered this disease as a proper dropfy of the part, as the hydrocephalus is of the head. In some instances again, the column is open from the occiput to the os sacrum, and the water is even found to descend from the fourth ventricle of the brain; the two diseases being then conjoined. These disorders have also sometimes been found to

O 2

succeed

ſucceed each other; ſeveral ſuch inſtances being related by WEPFER and MORTGAGNI. The latter of theſe writers relates one of a child of four years of age, where a dropſy of the ſpine ſucceeded to an hydrocephalus, which had taken place in conſequence of a contuſion of the head. The former being opened, the tumour of the head in a little time greatly ſubſided, and upon preſſing that part with a hand, a palish ichor ruſhed out from the aperture in the os coccygis; a circumſtance recorded alſo in other inſtances: the above infant, he reports, recovered. In another, upon the conſolidating of the ſpina byfida after an aperture had been made, water in a few days began to form in the head, which afterwards enlarged to a very conſiderable ſize. On the other hand, it has been noticed, that there is ſometimes no water, but the bony column is filled up with a carneous ſubſtance, or ſpongy marrow, and the complaint is then termed a hernia of the ſpinal marrow; agreeably to a ſimilar congenite diſeaſe of the head,  
which

which has been aptly called a hernia of the brain. In this case, some malformation of the spinal marrow may be considered as the original disease, unless it be supposed, that the proper cause exists in some interruption given to the process of ossification; whereby the medulla being deranged for want of its natural support, is in consequence distempered.

THE disease, it has been said, becomes fatal in consequence of the tumour being opened, or the integuments otherwise giving way, which is usually from a little slough, or gangrene, forming upon the thinner parts, which soon spreads wider and deeper, and so opens a way for the escape of the lymph. In a few days afterwards, and usually on the third, the infant dies, unless the parts should soon close again; which has but very rarely happened. A remote cause of the child's death then seems to be the escape of the lymph, which is frequently soon followed by a strong convulsion, in which the little sufferer expires. But where the



integuments have remained entire for any length of time, their rupture has been followed by hectic fever and marasmus, in consequence of a profuse drain from the part. But it is more common for the little patient to die either in a few days, or a week or two after birth, and then, probably, from some morbid change taking place in the medulla spinalis, from the admission of air; which is supposed to be always injurious to internal parts, and more particularly to membranous ones, and therefore must be peculiarly offensive to the spinal marrow and its sensible covering. These parts have, indeed, suffered from the birth, from the nature of the disorder, and it is not therefore to be wondered at, that such infants are more or less convulsed, and appear several times to be dying, before that event actually takes place, and that they are often otherwise ill; though some children appear pretty well till the integuments give way. I remember one child who would not take the breast for twenty-seven days, and  
was

was several times thought to be dying; but afterwards taking to it properly, was greatly recruited; appearing, except for this disease, in a promising way, and lived four weeks afterwards. The late Mr. HUNTER told me, that he had seen a child living with this disease at the age of eighteen months.

THE means of CURE that have hitherto been proposed for this dreadful disease, are, opening the tumour, in order to evacuate the water; or pressure, with a view to retain it, and consolidate the parts: neither of which, that I can with any certainty learn, have ever succeeded; unless it be in the instance mentioned by MORTGAGNI; but in this, the disease was not congenite. The means, however, do not always seem to have been employed with proper discrimination; since the very possibility of their succeeding will depend upon the size, and other circumstances of the tumour: for the aperture can never be adviseable where the tumour is large, and the consequent internal de-

rangement of parts is considerable; nor pressure where the water is found communicating with the ventricles of the brain.

The size of the tumour, it has been noted, is various, and agreeably thereto must be the possible chance of recovery, as well as the probable duration of the disease, where it proves ultimately fatal. This, indeed, is more frequently within three days after birth, or if the infant survives much beyond that time, it will be owing to the resistance of the integuments; young children, it has been said, seldom surviving the third day after the water begins to be freely evacuated. This, together with the matter of fact, where the tumour has been opened, furnish a sufficient caution against artificially letting out the water. Muys\* records a case of this kind, in which a child had lived to be three years of age, but the tumour being then opened, a great discharge of

\* *Praxis Medico chirurgica rationalis*, 1695;

water

water was kept up, which induced a hectic fever, and the child sunk at the end of three weeks. At the same time, a case related by WEPFER equally forbids the indiscriminate use of pressure. In this, an aperture made by a surgeon, from whence three ounces of water had issued, being healed up in consequence of firm pressure, an immense hydrocephalus formed by the end of the fourth week after birth. And VAN SWEETEN, who copies the case, justly observes, that if nature cannot get relief in such cases, by letting out the water at so distant a part from the head, no benefit can be derived from any means that may necessarily occasion an accumulation in the brain itself.

In such instances as the above, it is probable, that the source of the disease has been in the head, the water having made its way from the fourth ventricle of the brain; nature ever attempting to relieve the oppressed, and especially more noble parts. But in other cases it should seem, that the disease has commenced in  
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the loins, and the secretion being great, and the resistance below considerable, (possibly from the ossification being far advanced) the water has ascended to the head.\* But by dissection after death, it appears, that the water has more commonly been confined to the spine alone, and then has not been in great quantity.

It must be in the latter case only, as well as where the tumour, and deficiency of bone are inconsiderable, that any benefit can be expected from puncture and bandage, as Mr. ABERNETHY has lately ventured to propose. But from several objections which have been noticed above, arising from circumstances which Mr. ABERNETHY does not seem to be aware of, nor can be always previously ascertained, I should not think that parents would readily consent to the experiment, or that surgeons can have much to offer as an inducement to it; especially as the want of success must necessarily hasten the death

\* See *Opere di Ambrogio Bertrandi*, tom. ij.

of

of the infant. These considerations, I imagine, have made surgeons in this country cautious of making any attempts, and have induced me to state, as I have done, the result as given by foreigners.

SINCE the last edition of this work, Mr. ABERNETHY has ventured to make the experiment; and though he is led to think, that the attempt is, at least, proved to be harmless, I can, by no means, alter my opinion; and have therefore suffered my former observations to remain. Mr. ABERNETHY acquaints us, that "the tumour was punctured every fourth day, for six weeks, during which time the child continued unaffected. No contraction, however, of the integuments took place; and at this time one of the punctures did not heal, but permitted the fluid to ooze out. The discharge gradually changed from a limpid to a puriform appearance, and in a few days the child died. This case (he adds) is interesting, though unsuccessful; as it shews, that the attempt at a cure may, at least, be made without hazard."

hazard.”—I should, however, rather conclude, that the last aperture not healing up, and the child dying a few days after, serves to confirm the prognostic I had ventured to make, not only of the probable inutility of the puncture, but of the hazard. The collection of the water, if it be in any instances the first occasion of the disease, is not the whole of the evil; there being distemper in the membrane, and generally of the bone, which the admission of air to, cannot be harmless:\* while the puncture cannot prevent a re-accumulation of the fluid.

FROM the general report of authors, therefore, as well as the result of my own experience, it should seem, that little relief can, in general, be expected anywise from art. Some discrimination of cases, however, should be made, and perhaps

\* This sentiment, however, has lately been controverted, and some decisive experiments thought to be adduced in opposition to it, by Dr. HAIGHTON, in a paper on the *Cæsarean* operation, in the *Medical Records and Researches*. An. 1798.

this

this will refer principally to the absence of any symptoms indicative of water in the head, and to the size of the tumour, on whatever part of the spine it may be; but the lower down on the os sacrum, the more favourable. As to the first of these, the usual symptoms of compression of the brain do not, indeed, present themselves, and it is probable, owing to the relief which that part receives from the descent of the water to the parts below. The presence of water in the head may, nevertheless, sometimes be discovered, it being reported by MORTGAGNI, that upon pressing the tumour, the rising up of water has been felt by a hand placed on the fontanelle; and that from a firm pressure there, the water has again forcibly descended into the tumour on the spine.

In the absence, however, of every symptom leading to the suspicion of water in the head, and when the tumour on the spine, especially if low down on the sacrum, is very small, (for it has been met  
with



with of the size of a vetch seed ;\*) a firm compress, and sprinkling the part with astringent powders, or the use of similar fomentations, may be had recourse to, as recommended by ACRELL,†, and also by RUYSCH, who says he has seen ten cases. ACRELL was led to this opinion from some children having lived for several years with this complaint: but the tumour in such instances, I apprehend, has been very small, and the children have died whenever it has acquired the size it has more commonly at the birth. In such cases only, I imagine, can the attempt with any propriety be made; as otherwise, the tumour will, probably, be only ruptured the sooner by the bandage, and in consequence, the life of the infant be shortened.

There is not, however, the like objection to the use of an astringent, or cold embrocation, or more especially to dry-

\* See Ruyfch.

† *Memoirs of the Royal Academy of Sciences at Stockholm.* Anno 1749.

ing

ing powders, such as bolus armen. pulv. catechu, aluminis, and such like; which may be sprinkled on the part as occasion may require, to prevent the oozing of the lymph, by forming a kind of crust over the pellucid surface. Such applications may also have a tendency to retard the rupture of the integuments, and thereby prolong the life of the child; which is generally all that art can effect: and, I have myself, indeed, no further experience of their efficacy in the true spina bifida; although I have known such means, as well as excision of the parts, effect a cure in cases very similar in form and appearance to this fatal complaint,\* but without any deficiency of bone.

IN regard to bandage, I have been informed, that Dr. HUNTER in his lectures, at one time, used to caution against the attempt, from his own experience of its hastening, as he thought, the rupture of the integuments; but whether the trial

\* See *Parenchymatous Tumours* in the next Chapter.

had

had been made in the fittest case as here described, I could get no information.

Should the size or figure of the head, however, be from such management affected, or the infant manifest any increase of pain; or if convulsions, coma, or other bad symptom should supervene; the bandage ought to be taken off, and the mildest application be substituted, in place of the astringents. In this view, a bread and milk, or saturnine poultice, may be had recourse to, which is the modern practice whenever the tumour is large from the birth, and is, probably, in such cases, the fittest application that can be made use of; as it will sit easy on the part, and by forming a soft cushion, as it were, for the tender skin to rest upon, will in so far dispose it to be preserved entire as long as possible; the life of the child, it having been noticed, in almost every case, depending entirely upon that circumstance.

PAREN-

PARENCHYMATOUS TUMOURS.

THE resemblance which some of these bear to the last mentioned disorder, renders them worthy of particular notice, being not always easily distinguished from it. They appear on different parts of the spine, but more commonly near the neck, or to the os sacrum; are accounted *marks*, and are often of a morbid nature, and it is imagined, would not unfrequently prove fatal, if left to themselves. As I design, however, treating only of such as will admit of some remedy, I shall mention only two.

THE first is a tumour on some of the vertebræ, usually of the neck, or the first of the back; it is of a sublivid hue, unequal, internally spongy, and very vascular. I saw one of this kind some years ago, in consultation with the late Sir CÆSAR HAWKINS, who advised to preserve the

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skin unbroken as long as it should be possible, which he feared was all that could be done for it; and to this end, recommended the free use of the compound water of acetated litharge. It was then about the size of a crown-piece, and not raised very much above the level of the surrounding parts. The tumour, however, increased, and the skin not long afterwards gave way, and the child became ill; in consequence of which the late Dr. HUNTER was desired to give his opinion, who advised the extirpation of the tumour, as the only chance for preserving the child's life: but the father disapproved of the operation. The part soon began to bleed a good deal at times; in order to suppress which, as well as to lessen the tumour, which was now considerably more prominent, I sprinkled it with the following powder.

R. Bol. Armen. Pulv. Catechu ā ʒij.

Alumin. rup. ʒj. Misce.

Over this, compresses wetted as above were applied frequently through the day.

These

These would sometimes adhere for several days, owing to the blood and powder forming a sort of paste, till a fresh oozing from the vessels loosened them; at which time the bleeding returned, and the applications were repeated: by the continuance of which, however, for seven or eight weeks, and compression with a piece of thin lead, the vessels gradually shrunk, and the discharge being dried up, the part was happily skinned over, and the child recovered its health.

I have seen another tumour of this kind, which was treated in a different manner. It was seated on the last vertebra of the back, and was apprehended to be the true spina byfida: but as no margin of bone could be distinctly felt, nor the tumour, by pressure, be made to recede, I hoped it might be otherwise, and ventured to advise taking it off, as the only chance the infant had for its life. This was accordingly done when the child was about eight days old, and though a good deal of blood was lost in the oper-

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ation,

ation, from a deep seated artery, the sore at the end of the month was perfectly healed, and the child soon afterwards became as healthy as any other in the family.

*HEPARTOMPHALOS, and HERNIA  
VENTRALIS.*

**T**HE congenite ventral hernia, in which, from a deficiency of muscular integuments and skin, some of the abdominal viscera, and not unfrequently the liver, is protruded, is very often met with in abortions in the earlier months; though less commonly in the full grown fetus. I have never seen it in living children, unless in that instance of it termed hepartomphalos; which is the more immediate subject of this chapter, and will be clearly exemplified in the annexed case.

In the true hepartomphalos, there is, possibly, no actual deficiency of the muscular or ligamentous integuments, and  
still

still more probably, not of the skin; but as the term strictly implies, some part of the liver forms a congenite hernia of the navel. The liver while very small is some-  
 wise drawn down by the vessels of the umbilicus which enter it, (possibly by some action of the fetus;) is protruded at the muscular ring in the linea alba, and falls into the funis umbilicalis; which it dilates and distempers. This disease is a very rare one, I believe, in living children, and I had met with no written account of it, until Dr. COMBE put into my hands a *Thesis de hepatomphalocoe congenita*, by FRANCISC. HENRICUS ROCKHOLTZ, printed anno 1768.

The case there related corresponds so exactly with the one I met with, and both the infants surviving the disease; but some months afterwards dying of other complaints, and their bodies being carefully examined; the fact is established, and demonstrates the powers of the animal machine, in removing obstacles to its



well-doing, that might be thought insurmountable.

THE subject of the present case being born in the neighbourhood of the British lying-in hospital, was brought there for the advice of the physicians on a day when I was in attendance. The child was then eight days old, and the nurse informed me that the tumour still remained of the exact size it had acquired when the infant came into the world; but that previous to the binding it down tight, the skin had seemed to be thinner, but was even at that time discoloured, though it had a kind of transparency, as if it contained a fluid; and that the next day it turned black.

The dry funis was now appending from the centre of the tumour, which was as large as a good-sized china-orange; was black, and the skin, as I thought, in a sphacelated state.

Whether this tumour contained the liver, or any of the intestines, I could not

not at all determine ; or whether it might be a mere parenchymatous enlargement of the funis umbilicalis, of which I had lately seen an uncommon instance, of about one third of this size ; but in that, the enlargement commenced about three or four inches from the belly.

I had little doubt, however, from the size and colour of the tumour, that in the present instance, the infant would die in a few days, or at least, soon after the integuments should give way ; as it appeared highly probable, there would then be an opening into the cavity of the abdomen. I directed nothing therefore, but a bread and milk poultice, and this merely in the view to its being a soft cushion for the tumour to rest upon ; which did not, however, appear to be very sensible, though the infant cried much upon being moved, as if it were thereby put to pain.

Four days afterwards the child was brought again to the hospital. There was then but little change in the appearance of the tumour, nor much discharge

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from

from it; and the child having taken kindly to the breast had a healthy appearance; so that save from the suspicion arising from the nature of the tumour, it seemed very likely to live. Half an ounce of the decoction of bark was directed to be given three times a day.

I did not see the infant again for three weeks; and it was then near five weeks old. I now learned, that the child had thriven so well the parents were satisfied it was likely to live; and that the funis had fallen off on the fifteenth day, without being followed by any unpleasant symptom. That the tumour had burst about a week after the funis came off, from which time the swelling had sensibly subsided as the discharge kept up; and that at the end of the month, the discoloured integuments all sloughed off, and left a superficial sore of the size of a small tea-cup, to use the mother's expression.

The poultice was directed to be continued until I should see the infant again; which

which was about a week afterwards. There was then an oblong, benign, ulcer, about the size of a six-pence, and disposed to heal up. I now desired the poultice might be left off, and only to apply a bit of cerat. è lapide calamin. and moderate compress. By these means the sore was healed, when the infant was eight weeks old; soon after which I saw the child in perfect health.

The integuments at this time had not the usual appearance of the navel, but were on the contrary, thin, and little elevated, but without any thing like an umbilical hernia. The scar was not larger than a six-pence, and was not precisely in the middle of the abdomen, but a little on the left side of the point from which the funis naturally rises.

From the disagreeable appearance of this case when the infant was first presented at the hospital, such a termination was very pleasant to us, as it leads to encouragement concerning other obscure diseases; and manifests what unexpected things

things nature is capable of effecting, even at this early period, when not interrupted by any improper treatment.

The unfortunate infant, it has been said, fell a sacrifice about six months after birth, to another disease; in consequence of which its body was afterwards carefully examined by Dr. MARSHALL. Dr. COMBE happening to hear of it, was present, and informed me, that there could be no doubt of the liver having occasioned the tumour we had seen; there being yet a sensible depression remaining, evidently marking the stricture made upon it by the linea alba and recti muscles; which had included about one third of its left lobe.

Since the last impression, I have met with another instance of the hepartomphalos, in a full-grown, but still-born fetus; the complaint being also ascertained by an examination of the parts.

WHENCE it should come to pass, that infants should not only be born alive with, but survive, the hepartomphalos, rather

rather than the common ventral congenite hernia; or than they would do a large congenite exomphalos of the intestine; may be worthy of inquiry in this place. And the reason, probably, may be, that in the hernia ventralis congenita, whether from the protrusion of the liver, or any other of the abdominal viscera, there must be a deficiency of the muscular and other coverings of the abdomen, and therefore, nothing to support, or defend the protruded organs so essential to life, but the thin peritoneal expansion. But that, in the former, there is, perhaps, no actual loss of substance, but a mere dilation of the parts; the liver being at the same time defended by the strong expansion of the funis umbilicalis, which does not give way after birth, until nature has had sufficient time to withdraw that viscus into the cavity of the abdomen. This, it is imagined, is effected not only by the removal of the first cause of its descent, but also by that respiration which takes place immediately on the birth, and is further

further assisted by the ligament by which the liver is attached to the diaphragm; and by means of which it is mechanically drawn up, during every expiration.

*On the HARE-LIP, and other EXTERNAL  
BLEMISHES, or DISORDERS, supposed to  
be MARKS of the MOTHER.*

**T**HOUGH it be beyond the present purpose, to treat on surgical *Operations*, in general, I shall beg leave to notice a circumstance or two relative to that for the *bare-lip*, as I already have in a few others, which frequent opportunities of comparing the different success attending them have furnished. I shall afterwards advert to some other equally common blemishes, in a view to assisting the younger part of my readers to combat the unhappy prejudices of mothers in relation to *marking* their children. This, unfortunately for them-

themselves, they are always disposed to attribute to a violent impression from the sight of some disagreeable object, or to a disappointment in something they may have longed for, during their pregnancy.—And I have chosen this place for such observations as I have to offer on this head, because the *bare-lip*, and some other blemishes remaining to be noticed, bear that resemblance to objects around us, which is wanting in those before mentioned.

The repeated experience of every attentive observer, has uniformly militated against the tormenting suspicion alluded to, but still it prevails, though only to the injury of those who ought, for their own sake, to be persuaded to the contrary. Every man long in business has known many instances of mothers, tormenting themselves for six or seven months, in the painful apprehension of discovering some sad blemish in the child, (and on this account have trembled to look on it when it has come into the world;) which



which has afterwards proved to be as perfect as they could have wished, and as the more dispassionate amongst their friends have all along ventured to foretel. On the other hand, where children have been born with some real blemish, it has never been suspected by the mother,\* unless  
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\* Among several instances of such blemishes in children born in the British Lying-in Hospital, we have had some remarkable ones of the *entire ignorance* of any supposed cause. In one, the infant was more marked than almost any one I have ever seen; but I shall only notice, that the eye-lids, part of the nose and temple, and the greater part of one of the cheeks were as black as ink, and exactly resembled a dry gangrene of the parts. In a recent instance, the extremities were uncommonly ill-formed, not unlike those of aquatics; but the mothers of these infants had gone on to their full time, without having received any fright they could recollect, or suspecting any thing amiss in their children.

These children, however, were really so disfigured, that a lively imagination, with a mind strongly impressed, might not only have conceived in them a great resemblance to many objects, but it is more than probable, that the parents must have actually noticed not a few such, during the period of gestation. Where  
any

now and then in a most timid person, (who has always bred in fear on account of one disagreeable object or other she has seen,) or else, the blemish has turned out to be something *perfectly irrelative* to it. And here it ought to be noticed, that where a child has really been marked, and

any such deformity therefore may actually have taken place, practitioners should argue the point with their patients, and endeavour to persuade them, that such sights have not been the true cause of it, and that such objects, therefore, cannot contribute to the production of the like appearances another time.—In this view, I cannot help observing, that a few years ago, a lady of rank acquainted me, that she had passed almost the whole term of gestation in the apprehension of her infant being born with a *Harc-lip*, on account of her having been daily met by a labourer working in her own grounds, who had such a blemish. In this instance, the imagination seemed to have done its utmost; as the lady conceived she met this man oftener than any other, and that she could not avoid him, walk whichever way she might; and in consequence had his image continually before her, either in reality or in recollection; and being kept under a continual alarm by it, in the end declined walking at all in her garden.—After the opinion I have advanced, it may be needless to add, that the child was born free from the apprehended, or any other blemish.

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the mother has insisted on her having seen, and been frightened by an object which the blemish has resembled, it has (to the best of my knowledge, at least,) appeared always to be an after-thought, by which the supposed occasion of it has been discovered; and has not been taken notice of before-hand.—It is, however, the furthest from my thoughts to upbraid the sufferer on this painful occasion. I wish only to obviate the influence of a sentiment that I take to be without foundation—a sentiment that has originated in ignorance, and to which nothing but length of time and prescription could have given a sanction.

THAT there are blemishes which bear a resemblance to various objects around us, daily experience has proved; though the true occasion of them is not, perhaps, understood. The like deviations from the ordinary course is observed, not only in various other animals, and that not unfrequently, but also in the vegetable kingdom; in which the supposed influence  
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can have no place. Thus, fruits are often joined together and discoloured, having excrescences, and odd shapes, offering strange representations resembling animals, as well as anomalous irregularities, similar to those found on the bodies of infants: all, doubtless, proceeding from the established laws of motion, though not well understood by us.

IN regard to various discolourations in the skin of infants, fancied to resemble fruits, and like them becoming of a deeper red in summer; it may, however, be in point to observe, that the epidermis is, in such kind of marks, frequently altogether wanting, and if not, is always thinner than on other parts. The small blood vessels being also more numerous, or nearer the surface, the discolouration of the skin becomes a natural consequence; nor can it be any wonder, that this discolouration should be greater in summer than in winter, the cutaneous vessels being then more turgid with blood. The like change takes place in every mark on

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the face, when the person either cries, or is made angry, or when by any other means the blood is made to ascend to, or rest longer than usual in the superiour parts. All such appearances are, therefore, very easily accounted for, without supposing them the consequence of the parent having longed for such fruits as ripen, or grow red, in the summer months. We observe also similar changes in adults from long continued severe exercise, or hard-drinking; many people, before of a fair complexion, suddenly acquiring a red face, or have the nose both discoloured and mis-shaped.

The laws of motion will also equally account for the mutilation, and want of parts, the growth of which is somewise interrupted; it being well known, that the several members and parts of the body are not all formed or unfolded at once, but are pushed forward in their turn after some established law of nature, and organical matter. If, therefore, a due proportion of nourishment be with-held from  
any

any part, its proportionate growth is suppressed, or its formation entirely prevented. Hence the hare-lip; the two sides of the face, which are said to be formed separately, being hereby prevented from growing together: \* the upper lip is, at least, one of the last parts that come into coalition. For the like reason it is, that infants come into the world with large ventral herniæ, the muscular parietes, and especially the skin being one of the last processes in the embryo.† But whatsoever may be the weight of these observations, there is certainly nothing that we know of in a fright or longing, that can produce such a change in organized matter, nor can operate in the manner that has been supposed, much less at such different periods; but there is on the other hand, every thing against

\* For further remarks on this subject, the reader is referred to a Paper written by Mr. LUCAS of Leeds, in the *Memoirs of the Medical Society of London*, Vol. IV.

† HARVEY, *Exer.* 56 and 69.

such an hypothesis; which has accordingly always given way in enlightened ages.

It is well observed by Dr. BLONDEL, that were a due catalogue drawn up of all the irregularities, discovered at the birth, that are supposed to proceed from the mother's *Imagination*, they would appear to be the same over and over again, with no great difference, and very capable of being reduced into certain classes. Does not this intimate, that they proceed from the laws of motion, and the structure of the organs? There are besides many considerable deformities, which are never referred to the *Imagination*, viz. the irregular conformation of the viscera, &c. Is the whole empire of the microcosm so divided between Nature and the *Imagination*, that one rules within, and the other governs the outward parts?

The fetus is also a distinct individuum; it has the circulation of the blood independant on the mother; its own genus nervosum; a separate secretion of juices,  
and

and all the functions of animal economy in itself. On this account, we see a weak mother bearing a very strong and lusty child, et vicé versà; the mother being to her infant, what the earth is to a plant: the latter being strong may not be injured by being moved into a very different soil; or being tender, may, or may not, be benefited by it.

CHILDREN have likewise diseases of their own while in utero, such as cataract and gutta serena, varices,\* aneurisms, hydrocephalus; they are born blind, deaf, &c.

THE instance so often adduced from the sacred historian in opposition to such arguments,\* is, by no means, in point: for without adverting to the very peculiar natural circumstances in that transaction, which are wanting in ordinary instances, it is sufficient to observe, that there was therein an evident supernatural interposition. Should any one doubt of this, he has only to make a similar experiment, the result of which will, probably, have

\* *Genesis*, Ch. 30. ver. 37-42.



more weight than ten thousand arguments.† As matter of fact therefore, as before observed, does not at all countenance, but directly contradict the hypothesis, there is good ground for married women being argued out of such fears, and delivered from that painful conflict for weeks and months together; which so many of them endure. It will give me great pleasure if any thing I have advanced on the subject, should answer so desirable an end; whilst reason, philosophy, experience, and every thing on which we ought to depend, conspire to support such an attempt.

AMONGST the various *Marks* resembling some of the objects around us, that called

† Though I have ventured to say this, it is probable, there was also a coincidence of circumstances, although not in the manner vulgarly conceived of.—For many critical and satisfactory remarks, however, on the above passage of holy writ, the more curious reader may consult a learned tract, on the *Strength of the Imagination in pregnant women*, written by Dr. BLONDEL, a member of the College of Physicians, *Anno* 1727.

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the *Hare-lip* is the most common; a blemish therefore too well known to require a formal description. It is sufficient to observe, that it is of two kinds; the simple, wherein the upper lip only is divided, either wholly or in part, with some loss of substance; and the complex, in which the fissure of the lip is double: in some instances, the portion between the fissures is likewise too small to fill up the cavity, and in some it adheres to the very tip of the nose. The upper jaw, also, with the palate of the mouth, and even the uvula are sometimes divided. It would be beside my purpose, in this place, to treat of the manner in which this deformity and defection is to be remedied, especially as that must vary considerably in different cases; I shall confine myself to speaking only of the time in which it ought to be attempted.

Various considerations contribute to make the distressed parent solicitous to have this blemish removed soon after the infant is born, or at furthest before the

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month

month shall be expired. On this account, I am convinced, the operation has sometimes been prematurely performed, contrary to the better judgment of the operator, and the child thereby fallen a sacrifice; whilst others have received much less benefit than they would have done, had the operation been postponed for a reasonable time. Where the blemish is very trifling, indeed, and the operation simple, it may, in many cases, be done with safety in the course of the month, or a little after; and if the child be able to suck, which is not always the case, there are even some advantages in performing it sooner. For as the child will not be able to take the breast for two days at least after the operation, it will with difficulty be kept tolerably quiet by the spoon after it has been once put to the breast; but as infants need but very little nourishment for the first days after birth, and generally sleep a good deal; if the operation be done twenty-four hours after the child is born, it will be in a condition

tion to suck by the time it requires much nourishment, and the mother's breast is prepared to furnish it. But in the complex hare-lip the case is exceedingly different, and the longer the operation is postponed, the better it is likely to succeed; and should, at least, be deferred till the child shall be four or five months old. By this time also, the infant will have got over the period in which it is peculiarly liable to several painful and dangerous complaints; will be thoroughly weaned from its hankering after the breast, and have learned to feed contentedly with the spoon; by which children with this kind of hare-lip are obliged to be supported; they being generally unable to suck. At this period likewise, the parts will have acquired such a size as will admit of handling them to greater advantage, as well as a degree of firmness necessary to retain the needles; for the want of which, though the operation may appear to have been favourably performed, the needles will sometimes break out, and the deformity

### 234 *A similar BLEMISH of the MOUTH.*

mity be but little removed, or perhaps sometimes increased.

I HAVE once seen another blemish of the mouth in a child born at the hospital, which required a similar operation. In this infant, the mouth was much wider on one side than on the other, and appeared as if it had been divided far into the cheek, which occasioned a very awkward appearance; but as it was capable of being remedied in the same manner as the hare-lip, I shall only observe, that when I withdrew the pins on the third day, the parts adhered very firmly, and the child left the hospital at the usual time.

AMONGST other blemishes that may require surgical assistance, are those which women are wont more especially to call *marks*; being spots, more or less elevated above the surrounding skin, and of various forms and colours. These may fall on any parts of the body, but are very little regarded except when found on some uncovered part, especially the face, where,  
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perhaps, this kind is most commonly met with.

These, however, vary so much in shape, size, and in some other more important circumstances, that it were nugatory to attempt to point out the precise operation adapted to many of them. Suffice it to say, that in some, excision of the discoloured and elevated parts, or destroying them by caustic, is the only remedy; in others, compression alone is sufficient; and in a few, compression, together with slight puncture and caustic will be called for. In some parts of the face, as the cheeks, lips, the nose and near the eyes, the knife or lancet must be had recourse to with caution; though whenever made use of, it will be necessary to carry them full as deep, and far, as the distempered vessels may happen to extend, or the operation will not be completely successful. It is, indeed, sometimes necessary to repeat it; and it will be better to do so, than to destroy any sound parts unnecessarily, by which the  
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scar might be extended. Where great caution has been found necessary, it will sometimes happen, that though the blemish may seem to have been fully removed, the redness and tumour will after some months return; but even here, as a touch with the *argentum nitratum*, after lightly scarifying the parts, or at most, the carrying the lancet a little deeper than at first, will perfect the cure, it were pity it should be neglected, distressing as the idea of a second operation must be to the parents of the infant. In some instances, however, the recurring elevation as well as discolouration of the part, when slight, have gradually subsided without a second operation; which it may therefore be proper to defer for a few months: an instance of which I saw lately, where a second operation had been advised by the late Mr. HUNTER. From the very great advantages derived from these means, in some very unpromising cases that I have been witness to, I have been led to offer these remarks; and not doubting, that  
other

other practitioners have seen the like, I wish to impress the idea of consulting some skilful surgeon upon every great blemish; persuaded that many parents will, in the event, have occasion to be thankful for such consultation.

A DIFFERENT kind of blemish consists in little tumours and superfluous parts, without any discolouration of the surface. The former lie more or less deep under the skin, and consist of extravasated lymph, hardened fat, or indurated glands. Some of these likewise may be effaced merely by compression, while others can be removed only by caustic or excision. Pendulous parts, sometimes adhere only by a small base, like a thread, and may then be removed by only passing a tight ligature round them. But should any even adhere more firmly, and be only a small joint, such as a finger or a toe, it were better to have it taken off on the first days; as the vessels will then bleed but little, and the gristles by which such joints are usually connected, are not yet be-



become bony. But should the part be more completely formed, it may be necessary to delay the operation awhile longer, that by discovering which of the duplicates may take the lead, the more promising one may be preserved; which is not always to be known with certainty at the birth.

I MENTION one more trifling blemish, which I note with a peculiar satisfaction, from experience that nature alone is able to remedy it in certain instances wherein I had previously conceived, that some considerable recourse to art would be necessary. This consists of diverse unnatural forms of some parts about the head, particularly of the ears and nose. The latter of these is, certainly, of the more importance, and is sometimes turned greatly on one side, with one of the nostrils open very largely, and the other compressed. Suffice it to say, that after trying what might be done by plaster, bandage, and other contrivances, nature alone by the force of the circulating juices,

juices, has brought the parts, in the course of a few weeks, into their proper form.

BEFORE I quit this part of the subject, I should remark, that certain maculæ take place even after birth ; but these are not very common. They consist of small red, or black spots, about the face, and I believe are disposed to increase in size, and should therefore be early removed by the point of a lancet, as may then be easily done.

Beside these, there are blemishes of far greater importance, some of which demand an operation as the only chance for preserving the life of the infant. Such are imperforations of the vagina, the anus, and the urethra.

THE VAGINA is sometimes imperforate on the external, at others, only in the more internal parts; and is in different degrees. The latter more commonly relates only to the hymen, which requiring an operation to be performed about the age of puberty, I shall do no more than

than barely mention here, especially as it requires only a simple, or crucial incision, and to preserve the orifice open. Where the imperforation is in the substance of the vagina itself, I have never found an operation to be of any use, though I have known it attempted, in the adult, with great address and resolution.

I have never met with the external parts totally imperforate, there being always a small opening at the meatus urinarius; but I have found the aperture to the vagina so very small as to require a little operation, which is mighty easily done with the point of a lancet, there being always a raphè, or line, directing the extent nature has seemed originally to intend, which being cut through, requires only to be kept apart for a few days, by a bit of fine lint.

This has been the usual mode of remedying this defection; but I have for some years altogether rejected the assistance of the lancet, the parts being very easily separated by the fingers even in children  
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of several years old. It is not improbable, that the like method might succeed though the operation should be neglected till the time of puberty, the parts seeming rather to adhere in consequence of some very slight inflammation, than to have been originally ill-formed. A mere oozing of blood is perceived in consequence of this mode of separating the labia, which in the present instance, at least, seems preferable to incision, and may possibly afford less pain to the infant, as well as be less unpleasant in idea to its parents.

It is in this instance peculiarly important, that practitioners in midwifery, and others attending at the birth, should examine infants very attentively in regard to this complaint, which may be otherwise overlooked; the defection proving no obstacle to the natural excretions. I have met with several instances of it in children from three to six years old, in whom the complaint was but newly discovered, and it has been, in others, neglected to

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the time of puberty, and even of marriage, and must then prove of serious consequence, and may even be attended with hazard.\*

THE RECTUM likewise is sometimes found opening into the vagina; a case that affords but little prospect of relief. It should, however, be attempted; but the kind of operation must depend so much upon circumstances, that it cannot be here pointed out with any precision.

THE ANUS is sometimes closed only by a thin membrane, so that the day after birth the meconium may be distinctly felt, and in a manner seen shining through it. ZUINGERUS† reports such a case, which was relieved by only a slight puncture with a lancet, and passing the point of a finger into the bowel for two or three days afterwards—a bougie, one should think, would be every wise as proper.

\* See Henrici & Mornishen Observationes Medico-Chirurgicæ. *Dresdæ*, 1691.

† Theodor. Zuingerus. *Basileæ*, 1722.

But

But more commonly the imperforate anus is a melancholy case, as it seldom allows of an effectual remedy, the gut often terminating in a cul de sac so high up as not to be reached; it is not, however, always to be despaired of, though no fluctuation of the intestinal contents should be felt for two or three days after the infant is born.

Though this sad defection is not very uncommon, I remember only two cases of the kind in live-born children at the British Lying-in hospital. One of these, it fell to my lot to attend, and I happened to succeed, contrary, indeed, to all expectation, and after the child had puked up a great quantity of meconium; and not only the belly, but also the face was become exceedingly tumid, and the eyes had not been opened for some time.

THE manner of doing this operation must, in different cases, depend so much on the discretion of the operator, that I shall do no more than describe that which I made use of in the instance alluded to;

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and this may, possibly, be acceptable, as the operation is not often performed with success. It may be previously observed, that it ought to be postponed as long as it safely can, that the depending part of the bowel may be distended, and pushed as low down as possible; the reason for which is sufficiently obvious: and to this delay I am much inclined to attribute the success with which it was followed in the operation I performed.

This was not determined upon by my colleagues till the third day. A longitudinal incision was then made, of about half an inch, above and below the part where the anus ought to have been, which was marked by a little excrescence; a small bistoury was afterwards thrust up in the usual direction of the bowel, for more than an inch. No meconium following this puncture, I examined carefully with my finger, and feeling something like the fluctuation meconium would make, I introduced a trocar, and withdrawing my finger, I carried up the instrument in such  
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a direction as to avoid injuring the bladder, or forcing it against the os coccygis, for near an inch further; making allowance, however, for the yielding of the parts, which might be somewhat forced up by the trocar. The instrument having now passed forwards, without that resistance it had hitherto met with, gave me the sensation of having entered a cavity; when withdrawing the trocar, we had the satisfaction of finding the meconium running out at the canula. The child was now put into a warm-bath, up to the waist, and in a few minutes having voided a considerable quantity of meconium, it opened its eyes, looked cheerfully about it, and fell into a pleasant sleep before it was taken out of the bath.

A piece of bougie was occasionally introduced, and sometimes left in the part, for a few hours, for the first fortnight; after which the child recovered fast, and at the usual time was taken from the hospital in pretty good health, though it had been much reduced by a bad thrush,

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which



which unfortunately made its appearance soon after the operation; but it always voided its stools perfectly well.

THE imperforate PENIS is not quite so common a case; but is not unfrequently suspected, when the aperture of the passage is merely stopped up by a little mucus; and should therefore be examined in good time. In this case washing the part with warm milk and water, or at most, a little assistance with a small probe, or any such blunt pointed instrument, will be sufficient to open the passage. But it is evident, if the urethra be wanting no operation can be undertaken: it is, however, more commonly found open a certain way, and often as far as the basis of the glans, and sometimes near to its extremity; in which last instance, it is necessary only to make a small aperture with a lancet, or a fine trocar, and to keep the part open by the occasional introduction of a slender bougie. The more common complaint of this part however, is that of the urinary passage terminating  
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by a small aperture at a little distance below the glans, and sometimes on one side of it. In these cases, the precise circumstances must determine the propriety of any operation; which if not judiciously managed, may render the case worse than it was. I recollect two indeed, in which I was able to do considerable service, one of which was in the presence of the late Sir CÆSAR HAWKINS, and the other of the late Dr. HUNTER; in the latter, the urine was discharged from one side of the penis, and pretty low down, which was very happily remedied.

There are other mal-formations of this part, by which it is drawn downwards, or to one side; the peculiar circumstances of which, must point out the nature of the operation most likely to afford relief. This will generally consist in a simple incision of the skin, where it may happen to be too tight or short, and keeping the divided edges at a distance from each other, till the little sore shall be healed; or sometimes by dividing the upper part

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## 248 *The EARS IMPERFORATE—SQUINTING.*

of the prepuce, as in the periphimosis; which I have found successful in a late instance.

I HAVE likewise known the EARS to be imperforate, a case that admits of no remedy; but the external appearance may sometimes be improved, when the helix is turned forwards over the tragus, covering that part which ought to lead to the internal ear; but in these cases, I have always found the concha, and meatus auditorius, totally obliterated.

ANOTHER, and a very common blemish, is that called SQUINTING, which is sometimes contracted by very young infants, and may then frequently be remedied, especially if confined to one eye; but if a child be born with this deformity, or it be consequent to fits, it is not so likely to be removed. The means I have to recommend are, indeed, very simple. A very important one, however, is to apply a piece of sticking-plaster spread on some bright-coloured silk, in such a position, either on the temple, or the nose, agreeably

ably to the side on which the eye is distorted, as may draw it the contrary way. In order to keep up this attraction, the colour of the silk ought to be varied from time to time, as well as its situation; placing it a little higher, or lower, both for the sake of change, that the skin may not be fretted, as well as to answer any other end, that a due observation on its effects may point out. Besides this, the child ought always to be placed with that side towards the light from which the eye is distorted; and for the like reason, its parents, nurse, play-things, and every other object that can attract its notice, should as constantly as possible be on the same side, that the child may have every inducement its age and circumstances will allow, to draw the eye the right way, and by early habit, counteract a muscular action that is not yet become permanent.

Another method more proper for older children, is covering the eyes with ogles, which are glasses fixed in a little case,  
such

such as many people wear when they ride on horse-back. They must be so placed, that the child can see no object but by turning the eyes to the sides from which they are distorted. Or, an opaque covering of a similar form may be worn, with only a very small aperture in the center, by which the child will be obliged to look strait forward. It is scarcely necessary to add, that these contrivances must be worn constantly, till the bad habit shall be overcome.

WHERE the cast is confined to one eye, it has been recommended to cover the other; whereby the infant will in a little time acquire the habit of directing the affected one more properly. After this, the sound eye should be gradually uncovered, so as to admit the light by degrees. The child, it is said, will by this means very soon be enabled to direct both eyes properly to the same object.

To this end likewise, such children may be made to look at their own eyes in a mirror for a few minutes, several times

times in a day; but with the precaution that each eye be directed to that which corresponds with it in the glass; contriving, somehow, to render this remedy a kind of amusement. I shall only add on this head, that children who are inclined to squint ought not to be exposed to a very strong light, nor learn to read very young.

Infants are liable, indeed, to innumerable blemishes; but as I mean to treat only of such as call for medical attention, and admit of some remedy, I shall mention only two or three more, which are very common, and with them close what I have to say on their Complaints.

## VARI and VALGI.

**T**HESSE are distortions of the feet, and differ only with respect to the side to which the foot is turned; in the former, the soles of the feet being turned inwards,  
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## 252 DISTORTIONS of the FEET and HANDS.

and in the latter outwards: the curative intention is therefore alike in both. The complaint is sometimes very trifling, and seems to have been owing only to some cramped position of the feet in utero, and in that case, disappears before the end of the month. In other instances, there is evidently a contraction, if not accurtation of the tendons, which calls for considerable attention. The remedy, however, is obvious enough, and frequently consists only in the proper application of a roller and pasteboard splints, so as gradually to bring the foot to its natural position; and in proportion as it inclines thereto, increasing the force and tightening the roller, every two or three days.

THERE is also another very common distortion of the feet, in which they are turned upward towards the instep: but the mode of treatment is alike in them all, and the cure will usually be effected in a reasonable time.—The like easy means, therefore, will generally be sufficient to remedy a contraction of the joints

joints of the fingers, and various awkward positions of the toes, with which some infants come into the world.

All these complaints may, nevertheless, be sometimes more considerable, and in such case, especially if neglected for many months, or even years, as they sometimes are, require the assistance of some steel instrument, or irons, (as they are called) which are properly contrived for these and other distortions, as of the knees, &c. by *Messrs. Bowley, Sheldrake*, and other truss-makers; who seldom fail of bringing the parts into a more natural form, even in the worst cases, whenever the complaint may be thought worthy of the time and attention that may be required. But a less troublesome contrivance, and therefore better adapted to some country places, is a shoe made of tin, and lined with leather, as invented by *Mr. White of Manchester*. This must be well adapted to the foot, and a part of the leg, and be properly secured by strings.

**OTHER**



## 254 DISTORTIONS *of the FEET and HANDS.*

OTHER imperfections might be noticed, either remediable by obvious means, to be adapted, according to particular circumstances, by the persons attending; or such as happily remedy themselves in a little time. Among the former, I shall, however, mention one that occurred lately, which being new to other gentlemen who were consulted as well as myself, its favourable termination afforded peculiar satisfaction.

The subject of this, besides a slight degree of varus in one foot, had a contraction of the leg and thigh on that side; so that the heel and foot were drawn back towards the nates, and the knee to the abdomen. In this position the infant seemed to be easy, but to suffer great pain when the limbs were forced into the same extended position with the others: for it never stretched them out itself for upwards of three weeks. Two or three consultations were held during the month, and it was thought by one gentleman, that the glutæi muscles were a little swollen;

len; but this fulness was not very evident. Oily embrocations, a blister, leeches, and the semicupium were had recourse to, of which the two latter were probably the most useful; but it was not until they had been several times employed, that the infant was observed to straiten the limb, and at first, only now and then; but a few days afterwards it moved it as freely as the other.

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AS a matter of curiosity and novelty to the young reader, I shall close this part of my subject with briefly noticing certain peculiarities respecting the eyes and hair; some of which have likewise been laid to the charge of the *imagination*. Hair, for instance, of an unusually light colour, has at the age of three or four years, changed in a short time to a very dark brown; and the child in consequence, not been recognised by those who had not seen it for several months. Accounts of a similar change in the colour of the eyes are, I believe,

lieve, not well founded; at least, I have never noticed it myself, nor heard of such a change upon good authority; though the eyes of infants sometimes become a little darker, than they have been thought to be at the birth. But there are instances of infants born with the eyes of different colours, as well as the hair on the head; and in both, the colour is permanent. Sometimes, only one lock of hair has varied from the rest; but I have seen two instances of the one half being red, (as it is termed) and the other half, in one instance, black, and in the other, white. In the latter, the white part was exceedingly bright, soft, and of a silky texture, unlike that of hair, but feeling like undressed, or raw filk, and no wise differing from that of the *Albino*,\* of which likewise,

\* As a matter of like curiosity may be added a brief account of the *Albino*.

THIS name is given by the *Italians* to children whose heads are covered with a peculiar white hair of a very soft texture; not uncommonly met with about the *Italian* side of the *Alps*, and likewise in *Switzerland*.

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wife, I have known two instances in this country, and children of the same parents ; who had the one, brown, and the other, black hair.

The hair is whiter than that of any old people, or of any quadruped, as well as much softer ; it, indeed, resembles silk more than hair, and retains this texture through life. What is further remarkable is, that all children born with this kind of hair have eyes of as singular a colour, and that is, a pale red, or pink, which extends as well to the pupil, as over the iris. It may be remarked, by way of analogy, that some quadrupeds amongst us, of a breed originally foreign, whose hair is perfectly white, have always eyes either of a fine blue, or of a pink colour ; but in the *Albino* they are always red, which like the hair, is subject to no change.

THE END OF THE DISEASES,  
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